|  |  |
| --- | --- |
| Company Name |   |
| Address |   |
| Telephone |   |
| Fax |   |

**1. Key Personnel (This section is mandatory)**

|  |  |
| --- | --- |
| Managing Director / President |   |
| Telephone |   |
| Email |   |

|  |  |
| --- | --- |
| Operations Director / President |   |
| Telephone |   |
| Email |   |

|  |  |
| --- | --- |
| Quality Assurance Manager |   |
| Telephone |   |
| Email |   |

|  |  |
| --- | --- |
| Total No. of Employees: |   |
| Production Staff: |   |
| Quality Staff: |   |
| Total Plant Area: |   |

**2. Facility (This section is mandatory)**

|  |  |
| --- | --- |
| Air-conditioned. | [ ]  YES [ ]  NO [ ]  N/A |
| Humidity controlled. | [ ]  YES [ ]  NO [ ]  N/A |
| Security measures in place. | [ ]  YES [ ]  NO [ ]  N/A |
| Fire-fighting equipment available. | [ ]  YES [ ]  NO [ ]  N/A |

**3. Services Provided to SAESL**

a. Company Category

|  |  |
| --- | --- |
| [ ]  Providers | Proceed to a1 |
| [ ]  Repair Vendor | Proceed to a2 |

a1. Type of Providers

|  |
| --- |
| Kindly identify type of service(s) provided to SAESL. |
| [ ]  Tools Provider [ ]  Calibration Lab [ ]  OMAT [ ]  Standard Parts [ ]  Other Services |

Kindly provide all documents listed in accordance to the services provided to SAESL as declared.

|  |  |
| --- | --- |
| For Tools Provider only | [ ]  List of Product / Services |
| [ ]  ISO 9001 | Certificate No: Expiry Date:  |
| [ ]  Authorized letter by OEM (if applicable) |
| [ ]  Company Registration letter (applicable for non-OEM) |
| [ ]  Others | Certificate No: Expiry Date:  |

|  |  |  |
| --- | --- | --- |
| For Calibration Laboratory only | ILAC MRA Accredited Lab  | [ ]  List of Product / Services |
| [ ]  ISO / IEC17025 | Certificate No: Expiry Date:  |
| [ ]  Others | Certificate No: Expiry Date:  |
| Certificate No: Expiry Date:  |

*For more options please proceed to next page.*

*Continued.*

|  |  |  |
| --- | --- | --- |
| For Calibration Laboratory only | OEM Calibration Lab | [ ]  List of Product / Services |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  Others | Certificate No: Expiry Date:  |
| OEM Approved Calibration Lab | [ ]  List of Product / Services |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  Authorized letter by OEM |
| [ ]  Others | Certificate No: Expiry Date:  |
| Non-OEM Approved & Non-ILAC MRA Accredited Calibration Lab | [ ]  List of Product / Services |
| [ ]  If vendor is engaging 3rd party for calibration, kindly attach 3rd party oversight report | Report No:  |
| [ ]  Audit by SAESL in accordance with EASA user guide is required. If previously carried out, kindly attach audit report. |
| [ ]  Others | Certificate No: Expiry Date:  |

|  |  |
| --- | --- |
| For OMAT Provider only | [ ]  List of Product / Services |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  Authorized Letter by OEM (if applicable) |
| [ ]  Company Registration Letter (applicable for non-OEM) |
| [ ]  Others | Certificate No: Expiry Date:  |

|  |  |
| --- | --- |
| Standard Parts | [ ]  List of Product / Services |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  FAA AC-0056 | Certificate No: Expiry Date:  |
| [ ]  Part-145 certificate, Kindly provide details below. |
| CAAS | Certificate No: Expiry Date:  |
| FAA | Certificate No: Expiry Date:  |
| EASA | Certificate No: Expiry Date:  |
| CAAC | Certificate No: Expiry Date:  |
| JCAB | Certificate No: Expiry Date:  |
| DCAM | Certificate No: Expiry Date:  |

*For more options please proceed to next page.*

*Continued.*

|  |  |  |
| --- | --- | --- |
|  | Others | Certificate No: Expiry Date:  |
| Others | Certificate No: Expiry Date:  |
| Others | Certificate No: Expiry Date:  |

|  |  |
| --- | --- |
| Other Services | [ ]  List of Product / Services |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  Company Registration Letter (applicable for non-OEM) |
| [ ]  Others | Certificate No: Expiry Date:  |

a2. Type of Repair Vendor

|  |
| --- |
| Kindly identify if your company is Part-145 Approved. |
| [ ]  YES, we are Part-145 Approved repair vendor.[ ]  NO, we are not Part-145 Approved repair vendor |

Kindly provide the following documents in accordance to the input provided above.

|  |  |
| --- | --- |
| Part-145 approved repair vendor | [ ]  Various authority’s capability list |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  RR SABRe | Certificate No: Expiry Date:  |
| [ ]  NADCAP (applicable for special process) | Certificate No: Expiry Date:  |
| Certificate No: Expiry Date:  |
| Certificate No: Expiry Date:  |
| Certificate No: Expiry Date:  |
| [ ]  Part-145 Certificate, Kindly provide details below. |
| CAAS | Certificate No: Expiry Date:  |
| EASA | Certificate No: Expiry Date:  |
| FAA | Certificate No: Expiry Date:  |
| DGCA Indonesia | Certificate No: Expiry Date:  |

*For more options please proceed to next page.*

*Continued.*

|  |  |  |
| --- | --- | --- |
|  | UAE GCAA | Certificate No: Expiry Date:  |
| DCAM | Certificate No: Expiry Date:  |
| CAAT | Certificate No: Expiry Date:  |
| TCCA | Certificate No: Expiry Date:  |
| QCAA | Certificate No: Expiry Date:  |
| CAAC | Certificate No: Expiry Date:  |
| MOLIT | Certificate No: Expiry Date:  |
| JCAB | Certificate No: Expiry Date:  |
| CAAP | Certificate No: Expiry Date:  |
| DGAC Chile | Certificate No: Expiry Date:  |
| CAAV | Certificate No: Expiry Date:  |
| CASA | Certificate No: Expiry Date:  |
| HKCAD | Certificate No: Expiry Date:  |
| ANAC | Certificate No: Expiry Date:  |

*For more options please proceed to next page.*

*Continued.*

|  |  |  |
| --- | --- | --- |
|  | PACA Oman | Certificate No: Expiry Date:  |
| [ ]  Others | Certificate No: Expiry Date:  |

|  |  |
| --- | --- |
| Non-Part-145 approved repair vendor | [ ]  List of Product / Services |
| [ ]  ISO9001 | Certificate No: Expiry Date:  |
| [ ]  Company Registration Letter (applicable for non-OEM) |
| [ ]  SAESL Audit | Report No:  |
| [ ]  Others | Certificate No: Expiry Date:  |

**4. Quality System (This section is mandatory)**

|  |  |
| --- | --- |
|  | **Remarks** |
| 4.1. Are certificates, operation specifications and registrations required by the Code of Federal Regulations for any facility kept currently and available for inspection and verification? | [ ] YES [ ] NO [ ] N/A |   |
| 4.2. Is the facility plant area suitable/adequate for prescribed scope of work? | [ ] YES [ ] NO [ ] N/A |   |
| 4.3. Does the U.S based contracted/subcontracted maintenance/preventive maintenance providers, at all tiers (certificated and non-certificated) are actively participating in the anti-drug and alcohol misuse prevention program? | [ ] YES [ ] NO [ ] N/A |   |
| 4.4. Are procedures in place for maintenance, preventive maintenance, alterations, and inspections? | [ ] YES [ ] NO [ ] N/A |   |
| 4.5. Are procedures in place for inspection of incoming materials to ensure acceptable quality? | [ ] YES [ ] NO [ ] N/A |   |
| 4.6. Are procedures in place for detecting and reporting suspected approved parts (SUP)? | [ ] YES [ ] NO [ ] N/A |   |
| 4.7. Are procedures in place for performing final inspections of maintained articles? | [ ] YES [ ] NO [ ] N/A |   |
| 4.8. Are procedures in place for controlling shelf life items? | [ ] YES [ ] NO [ ] N/A |   |
| 4.9.a. Are procedures in place to determine the airworthiness of an article contracted to a non-certified repair station? | [ ] YES [ ] NO [ ] N/A |   |
| 4.9.b. Are there any contract allowing FAA / NAA to inspect the non-certified repair facility? | [ ] YES [ ] NO [ ] N/A |   |
| 4.10. Are procedures in place to determine major/minor repair scope? | [ ] YES [ ] NO [ ] N/A |   |
| 4.11. Are procedures in place to ensure compliance with air carrier specifications? | [ ] YES [ ] NO [ ] N/A |   |
| 4.12. Are Quality and Procedures Manuals available for use by inspection personnel? | [ ] YES [ ] NO [ ] N/A |   |
| 4.13. Are Quality and Procedures Manuals revised/reviewed continually to the industry/regulatory authority’s specifications as required? | [ ] YES [ ] NO [ ] N/A |   |
| 4.14. Is the Quality, and/or Procedures Manual available upon request? | [ ] YES [ ] NO [ ] N/A |   |
| 4.15. Is the quality assurance organization independent from production responsibilities? | [ ] YES [ ] NO [ ] N/A |   |
| 4.16. Are procedures in place to investigate and correct the root cause of discrepancies revealed by internal/external audits? | [ ] YES [ ] NO [ ] N/A |   |
| 4.17. Are results of internal/external audits reviewed by upper management?**How often? :**   | [ ] YES [ ] NO [ ] N/A |   |
| 4.18. Is there a program to audit vendors/suppliers/sub-contractors?**Provide Details:**   | [ ] YES [ ] NO [ ] N/A |   |
| 4.19. Are procedures in place for training and maintaining proficiency for personnel? | [ ] YES [ ] NO [ ] N/A |   |
| 4.20. Are training records maintained for each inspector? | [ ] YES [ ] NO [ ] N/A |   |
| 4.21. Are inspectors required to be certified? **If Yes, by whom? :**  | [ ] YES [ ] NO [ ] N/A |   |
| 4.22. Does the Quality Department maintain an up-to-date signature roster? | [ ] YES [ ] NO [ ] N/A |   |
| 4.23. Do airworthiness release certificates/Certificate of Compliance/Test Report attached to new/repaired/overhauled items contain at least the following data:* Airworthiness Release Statement certifying approval for return to service i.a.w. applicable regulations, or Compliance statement certifying the component identified was manufactured/repaired/calibrated in accordance to specifications.
* Condition of Part (New, Serviceable, Overhauled, Modified, etc.)
* Part Number
* Serial Number (when assigned)
* Pertinent details of the repair, or reference to the work order on which the details are recorded.
* Date of repair/overhaul/manufacture/calibration, etc.
* Air Agency Certificate Number (Repair Station, Manufacturer’s Maintenance Facility, Airworthiness Authority’s organization approval number)
* Signature of an authorized representative of the Repair/Overhaul Agency/Distributor/Manufacturer/Calibration Services
 | [ ] YES [ ] NO [ ] N/A |   |
| 4.24. Are repair/overhaul/calibration actions accomplished on the components/parts at locations other than the address stated at the top of this form?**If Yes, provide details:**   | [ ] YES [ ] NO [ ] N/A |   |
| 4.25. Are inspection records retain?**If Yes, for how long:**   | [ ] YES [ ] NO [ ] N/A |   |
| 4.26. Are inspection records available for examination by customer representatives? | [ ] YES [ ] NO [ ] N/A |   |

**5. Measuring and Test Equipment (This section is mandatory)**

|  |  |
| --- | --- |
|  | **Remarks** |
| 5.1. Are there any documented procedures describing the methods and frequency of calibration of measuring, test equipment, master gauges or standards?  | [ ] YES [ ] NO [ ] N/A |   |
| 5.2. Are measuring and test equipment marked to indicate calibration status and date of calibration expiry? | [ ] YES [ ] NO [ ] N/A |   |
| 5.3. Are measuring and test equipment calibrated to an established reference standard? (E.g. national standard, industry standard, etc.)**If Yes, please state standard:**   | [ ] YES [ ] NO [ ] N/A |   |
| 5.4. Are sufficient measuring/test equipment available to inspection personnel? | [ ] YES [ ] NO [ ] N/A |   |
| 5.5 Is there a recall system to prevent measuring/test equipment from being used after the calibration expiry date? | [ ] YES [ ] NO [ ] N/A |   |

*Section 6, 7 and 8 is applicable for Engine/Component Repair Vendors only*

**6. Technical Publications (This section is applicable for Engine/Component Repair Vendors only)**

|  |  |
| --- | --- |
|  | **Remarks** |
| 6.1. Is the organization Rolls Royce approved supplier? | [ ] YES [ ] NO [ ] N/A |   |
| 6.2. Does your company use RR Aeromanager, RR lifeweb, RR Portal (SABRe), controlled CD from OEM or other RR documents | [ ] YES [ ] NO [ ] N/A |   |
| 6.3. Are the applicable manufacturer’s repair/overhaul manuals, ADs, and Service Bulletins available at your company’s premises? | [ ] YES [ ] NO [ ] N/A |   |
| 6.4. Is there a formal system/procedure in place to establish and maintain the manuals/documents/technical data mentioned above to current revision status? | [ ] YES [ ] NO [ ] N/A |   |
| 6.5 Are repairs/overhauls being accomplished in accordance with the applicable manufacturer’s current specifications? | [ ] YES [ ] NO [ ] N/A |   |
| 6.6. Is there a system to control working copies of work instructions to ensure they are revised to align with the Master copy? | [ ] YES [ ] NO [ ] N/A |   |
| 6.7. Are manuals properly identified and available to production staff? | [ ] YES [ ] NO [ ] N/A |   |
| 6.8. Are there any work instructions in use that deviate from the OEM’s specifications or recommendations?**If Yes, attach list providing details.** | [ ] YES [ ] NO [ ] N/A |   |

**7. Control of Discrepant and Scrapped Parts (This section is applicable for Engine/Component Repair Vendors only)**

|  |  |  |
| --- | --- | --- |
|  |  | **Remarks** |
| 7.1. Does your company handle / distribute PMA parts? | [ ] YES [ ] NO [ ] N/A |   |
| 7.2. Are procedures in place for controlling scrapped parts? | [ ] YES [ ] NO [ ] N/A |   |
| 7.3. Are all serviceable and unserviceable parts/components identified and physically segregated? | [ ] YES [ ] NO [ ] N/A |   |
| 7.4. Are records maintained for all discrepant new/used parts and scrapped parts in the Company? | [ ] YES [ ] NO [ ] N/A |   |
| 7.5. Is there a documented procedure to ensure that scrapped parts are either returned to the customer or mutilated beyond repair? | [ ] YES [ ] NO [ ] N/A |   |

**8. Traceability / Certificate of Conformance (This section is applicable for Engine/Component Repair Vendors only)**

|  |  |  |
| --- | --- | --- |
|  |  | **Remarks** |
| 8.1. Are all parts and materials used in the repair, overhaul or servicing of SEASL’s components or parts traceable to an approved source named in the vendor’s supplier list? | [ ] YES [ ] NO [ ] N/A |   |
| 8.2. Does the procedure include complete disclosure regarding accident, incident, and other abnormal occurrences that the material was exposed to? | [ ] YES [ ] NO [ ] N/A |   |

**THE INFORMATION TRANSMITTED IN THIS QUESTIONNAIRE IS CERTIFIED COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.**

**AUTHORISED COMPANY OFFICIAL**

**NAME (Print):**

**TITLE:**

**SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE:**

**FOR SAESL USE ONLY**

Supply Planning / Procurement:

Accepted/ Rejected (delete as appropriate)

Remarks:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

General Manager / Manager / Head

Stamp, Sign & Date

cs

Quality:

Accepted/ Rejected (delete as appropriate)

Remarks:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

General Manager / Manager / Head

Stamp, Sign & Date