

BY: MS DATE: 01/20/2012	 Kodiak Aircraft Company Supplier Questionnaire Special Process House	PAGE: 1 of 4
CHKD: CAR DATE: 05/02/2024		REPORT NO.: QF 31.95
RVSD: CNY DATE: 05/08/2024		REVISION: 01

SUBJECT: Instruction-supplier quality Questionnaire

Please furnish the information requested below to enable Kodiak Aircraft Company to confirm your company’s ability to supply goods or services to our specifications. Your prompt completion of this questionnaire will keep your company on our Approved Supplier List without interruption.

Complete and return all required pages of this survey to Kodiak Aircraft within 10 business days. If you have any questions, contact the Kodiak Aircraft Quality Auditor via email or by phone at (208) 263-1111.

1. General Information

Company Name:	
Address:	
City, State, Zip Code:	Country:
Phone:	Fax:
Division or Subsidiary of:	
Principal Products and/or Services:	
Years in Business:	Available Capacity:

2. Key/Quality Contact Information

Quality Dept. Head			
Name:		Email:	
Position:		Phone:	
Secondary Contact Dept. Head			
Name:		Email:	
Position:		Phone:	

3. References/Quality System Approvals

REFERENCES: Tell us how to contact other companies to which you are currently supplying products, articles, and/or services			
Reference 1:		Phone:	
Contact Name:		Email:	
Reference 2:		Phone:	
Contact Name:		Email:	
Reference 3:		Phone:	
Contact Name:		Email:	

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PRIOR APPROVALS			
Prior Approval 1:		Phone:	
Contact Name:		Email:	
Prior Approval 2:		Phone:	
Contact Name:		Email:	
Prior Approval 3:		Phone:	
Contact Name:		Email:	

4. Quality System Standard

Indicate any FAA approvals held by your organization:					
Repair Station: <input type="checkbox"/>	PC: <input type="checkbox"/>	TC: <input type="checkbox"/>	STC: <input type="checkbox"/>	TSO: <input type="checkbox"/>	PMA: <input type="checkbox"/>

Indicate any third-party certification held by your organization and provide copies of certifications:			
ISO 9001: <input type="checkbox"/>	AS9100: <input type="checkbox"/>	AS9120: <input type="checkbox"/>	Other: _____

Indicate special processes performed by your organization and provide copies of any certifications:					
Chem Film: <input type="checkbox"/>	Cad Plate: <input type="checkbox"/>	NDT: <input type="checkbox"/>	Heat Treat: <input type="checkbox"/>	Anodize: <input type="checkbox"/>	Welding: <input type="checkbox"/>
Other: _____			Other: _____		

SPECIAL PROCESS CAPABILITY: Tell us about your processes, equipment used, primary products processed, etc.

INSPECTION CAPABILITY: Tell us about your equipment, number of inspectors, sampling plan, calibration and process controls, etc.

RECORD RETENTION: Tell us about your record retention capabilities, retention time period, methods of storage, access restrictions, etc.

PERSONNEL CHANGES: Tell us about significant personnel changes over the past 12 months (if any)

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5. General Questions

	Yes	No	N/A
1. Are your Quality organization's authority and responsibilities clearly defined in writing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does your Quality organization have clear authority to withhold items that have not met acceptable quality standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does your Quality organization have direct access to appropriate levels of your company's management to efficiently and effectively resolve/correct any quality-related problems and/or conflicts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does your company have and maintain a written Quality Manual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Can you supply Kodiak with a copy of your written quality Procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your company have an engineering drawing change control system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your Quality organization have and maintain a corrective and preventative action program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does your Quality organization maintain records pertaining to item acceptance/rejection, disposition of rejected items, and other related factors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Does your Quality organization test and certify employees in the application of quality methodologies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Can Production workers approve their own work under your Quality System?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does your Quality organization have a system for evaluation and approval of potential suppliers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Does your Quality organization have and maintain an Approved Supplier List?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Does your Quality system require that your suppliers have and employ adequate Quality programs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Does your company have a system for disseminating applicable technical and quality requirements to your domestic (U.S.) suppliers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Does your company have a system for disseminating applicable technical and quality requirements to your international (non-U.S.) suppliers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Does your company use only domestic (U.S.) suppliers and materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Do your purchase orders clearly describe the work to be performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Do your purchase orders clearly specify acceptance criteria?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Does your Quality organization review all purchase orders prior to issuance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Do your purchase orders specify documentation requirements (when applicable)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Does your Quality organization have and maintain a receiving inspection system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Do your receiving inspectors have ready access to appropriate drawings, engineering orders, specifications, vendor catalogs, purchase orders, and other similar reference materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Do your receiving inspectors use drawings that are legible and reflect the latest approved changes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Are your receiving inspectors provided with adequate inspection instructions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Do your receiving inspection records capture a "quality history" for your suppliers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Do your receiving inspectors have ready access to measuring devices, inspection gauges, test equipment, etc. that are appropriate and adequate for the inspection and test procedures required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Does your company have and employ a control system for customer-furnished materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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28. Does your company have and employ a system to ensure that nonconforming and/or uninspected materials are not utilized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Does your Quality System require that all finished goods are inspected against contract requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Do your final inspectors have ready access to appropriate drawings, engineering orders, specifications, vendor catalogs, purchase orders, and other similar reference materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Do your final inspectors use drawings that are legible and reflect the latest approved changes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Are your final inspectors provided with adequate written inspection instructions and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Do your final inspectors have ready access to measuring devices, inspection gauges, test equipment, etc. that are appropriate and adequate for the inspection and test procedures required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Does your Quality organization maintain procedures that require periodic inspection and/or recalibration of all measuring devices, gauges, and other similar inspection/test equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Does your Quality organization maintain procedures that require periodic inspection and/or recalibration of all production tools that used as a medium of inspection during the production process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Does your Quality organization maintain a system that provides periodic inspection and/or recalibration of all tools, gauges, etc. that are owned by employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Does your Quality organization require inspection and/or calibration of new measuring devices, gauges, and other similar inspection/test equipment prior to utilization?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Does your Quality organization require inspection and/or recalibration of reworked measuring devices, gauges, and other similar inspection/test equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Does your Quality organization have and maintain written calibration procedures for measuring devices, gauges, and other similar inspection/test equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Are all measuring devices, gauges, and other similar inspection/test equipment labeled to indicate when the next calibration is to be performed (if applicable)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Does your company have written procedures for the handling of nonconforming materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Can you supply Kodiak with copies of inspection records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Can you supply Kodiak with copies of special process certification/qualification records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Comments

COMMENTS

7. Signature/Date

As a supplier to an aircraft manufacturer subject to FAA regulations, it is understood that a supplier's facilities, quality system, and related equipment are subject to audit by agents of Kodiak Aircraft and/or the FAA. By completing and returning this survey you are agreeing to cooperate with any such audit or inspection without additional charges to Kodiak Aircraft. Further, you are certifying that all information submitted is correct and true to the best of your knowledge.

Submitter's Name	Submitter's Title	Date: