



Supplier Quality Expectations Survey

Instructions:

1. Click through cells / checkboxes to provide your response.
2. Enter supplier number if known.
3. Identify as having a completed survey and return to Tempco buyer.

Part I:

Supplier (Company) Identification:

Supplier Number:		Date:	
Supplier Name:			
Address 1:		Address 2:	
City:	State:	Zip:	
Phone:	Fax:		
Contact:	Email:		

Type of Business: Manufacturer Distributor

Business Structure: Corporation Partnership Division Of Private

Workforce:

Number of Employees (total):	Number of Employees (QC):	Number of Shifts:
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Workweek Days: 5 7 Other

Union: Yes No

Manufacturing Capabilities:

Square Footage (MFG):	Square Footage (WH):	Machine Utilization (%):
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Does your company retain a business contingency/continuity plan in the event of unforeseen circumstance?

Yes No

ISO 9001 Certified: Yes (forward copy of certificate) No (complete survey, part two)

Completed By:

Name:	Title:	Date:
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Part II:

Supplier Quality Expectations Survey:

1.
 Yes No N/A Are there clearly communicated, defined and documented responsibilities and authorities for all personnel impacting quality, including a quality manual?
2.
 Yes No N/A Are the contract review activities adequately documented and maintained to ensure that order requirements are understood and are within the company's capability prior to acceptance of customer order?
3.
 Yes No N/A Are procedures in place to define the criteria for selection and ongoing evaluation of suppliers or subcontractors?
4.
 Yes No N/A Is product identification maintained, with traceability recorded when required by the customer?
5.
 Yes No N/A Are planned production activities being carried out under controlled conditions, including control of all technical drawings, documentation and data?
6.
 Yes No N/A Are inspection and testing activities performed throughout the process, with test results and status maintained?
7.
 Yes No N/A Are personnel who perform work affecting quality and/or product verification requirements competent based upon education and/or experience?
8.
 Yes No N/A Is data collected and analyzed to evaluate where continuous improvement(s) can be made, with continuous improvement(s) initiatives documented?
9.
 Yes No N/A Are production processes, where the resulting output cannot be verified by subsequent monitoring or measurement validated, with the results documented?
10.
 Yes No N/A If validation is required, does the documentation include criteria for review and approval of the processes, equipment, procedures, as well as qualification of personnel?
11.
 Yes No N/A Is there identification, documentation, segregation (where possible to a designated area) and disposition of non-conforming and/or suspect product?
12.
 Yes No N/A Are non-conformances investigated, with the results documented, within a corrective action report that identifies the root cause, actions taken and verification of the effectiveness?
13.
 Yes No N/A Is the customer's perception, as to whether the company has fulfilled customer requirements, monitored, inclusive of quality and delivery performance?
14.
 Yes No N/A Are there records that show effective operation of the quality system and is said documentation available to the customer?