

This checklist is a guideline to perform facility audit for nominated or registered Galaxy Aerospace (M) Sdn Bhd (GAM) Approved Vendor. If question is not applicable to the organisation, please indicate **N/A**.

Note to Vendor: Your organisation has been registered as GAM's Approved Vendor, thus the need to audit the facility. All provided information required by this checklist must be true and correct. It should be understood that any false statement or fraudulent information shall be a basis for disqualifying the organisation as our vendor. Your Organisation's Quality Management Representative is recommended to accomplish this checklist.

1. Organisation's Name:	2. Business Address: (Location of facility address)
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3. Phone No.:	4. Fax No.:	5. E-mail:	6. Website:

7. Type of Business:

OEM	<input type="checkbox"/>	Distributor/Supplier	<input type="checkbox"/>	Contractor	<input type="checkbox"/>	Sub-Contractor	<input type="checkbox"/>
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8. Size of the Facility (Sq. Meters):	9. Total Number of Employees.														
(Please attach copy of the facility layout):	<table border="1" style="width:100%"> <thead> <tr> <th style="width:70%">Description</th> <th style="width:30%">Quantity</th> </tr> </thead> <tbody> <tr> <td>a) Management personnel</td> <td>: _____</td> </tr> <tr> <td>b) Certifying/inspection personnel</td> <td>: _____</td> </tr> <tr> <td>c) Technician</td> <td>: _____</td> </tr> <tr> <td>d) Support staff (Planner/Records/Engineering personnel, etc.)</td> <td>: _____</td> </tr> <tr> <td>e) Quality personnel</td> <td>: _____</td> </tr> <tr> <td>f) Administration personnel</td> <td>: _____</td> </tr> </tbody> </table>	Description	Quantity	a) Management personnel	: _____	b) Certifying/inspection personnel	: _____	c) Technician	: _____	d) Support staff (Planner/Records/Engineering personnel, etc.)	: _____	e) Quality personnel	: _____	f) Administration personnel	: _____
	Description	Quantity													
	a) Management personnel	: _____													
	b) Certifying/inspection personnel	: _____													
	c) Technician	: _____													
	d) Support staff (Planner/Records/Engineering personnel, etc.)	: _____													
	e) Quality personnel	: _____													
f) Administration personnel	: _____														

10. General Information

a) Principle Business:

b) Head of Quality System (Name, Designation and Contact No.):

c) Person to Contact for Quality Issues (Name, Designation and Contact No.):

11. Is the Quality System certified/accredited in accordance with: (if yes please attach all copies of the Certificate(s)).

AS9120	<input type="checkbox"/>	AS9100	<input type="checkbox"/>	ISO 9000 Series	<input type="checkbox"/>
CAAM/FAA/EASA	<input type="checkbox"/>	ISO 17025	<input type="checkbox"/>		
OTHERS: (please specify)					

12. Is the organisation approved distributor for any manufacturer? YES NO

(If yes, please specify and attached all copies of approval/authorisations)

13A.	Quality System and Quality Manual	Yes	No	N/A	Remarks
1.	Does the organisation have a documented organizational structure, responsibilities, and authority of management personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Does the organisation have adequate personnel/organization qualified (i.e., properly trained and competent) to perform, supervise and inspect current workload?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are inspection personnel sufficiently trained and experienced in order to maintain proficiency in their work assignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Does the organisation maintain records of experience and technical training in accordance with the requirements of the MOE/RSQCM/Company Quality Manual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Does the organisation maintain a roster/list of supervisory and inspection personnel/approval holder? (If yes, please attach copy of the list)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Does the roster/list identify all personnel authorized for return-to-service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Does the organisation maintain employment summary for all certifying/inspection personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Are employment summaries and training records retained for three (3) years after personnel leave the company?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Are qualifications of certifying/inspection personnel continuously being monitored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Does the organisation have continuous training program in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Are the certifying/inspection personnel have appropriate practical skills, knowledge of current technology, human factors, and latest training techniques?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Does the organisation have an acceptable system for controlling stamps for both inspection and production personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.	Does the quality manual contain instructions and samples of forms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13B.	Inspection Procedures	Yes	No	N/A	Remarks
1.	Are all parts inspected for physical damage and preservation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are standard parts verified as meeting technical specifications?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are there acceptable sampling procedures used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Are consumables and raw materials inspected for condition, presence of certifications, and test reports?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	If inspection stamps are used, does the policy require a stamp to be retired for a minimum of three (3) years after an inspector leave?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Are all incoming material held in a separate area or shelf until accepted by receiving inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Are there segregated shelf for rejected items?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Does the inspection program include:				
	a) Inspection of the packages damaged during transportation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	b) Check of the compliance with the purchase order in regard to quality and quantity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	c) Verification of part number, model number, etc. to match the documentation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	d) Visual inspection for surface treatment, corrosion etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	e) Check of appropriate markings on the product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	f) Check of material certification, other applicable certificates, certificate of origin as may be required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	g) Check of certification matching in accordance with specification (or ordered work)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13C.	Shipping Procedures	Yes	No	N/A	Remarks
1.	Do the shipping instructions require an inspection to ensure that the product conforms to the purchase order and that applicable document and certificates are attached?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are the packages packed in accordance with the packing requirements as applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Does the system require supplying the original manufacturer's certificate to the customer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Do appropriately trained personnel conduct an inspection of items being shipped, including but not limited to:				
	a) Obvious physical damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	b) Installation of plugs and caps?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	c) Verification of quantity, part number, serial number, model number, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	d) Packing slip information as required by customer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	e) Verification of airworthiness approval, material certification, traceability documents, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	f) HAZMAT materials properly inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13D.	Technical Data Control	Yes	No	N/A	Remarks
1.	Is there a documented system to obtaining technical data and maintaining it up to date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is the appropriate and current technical data readily available to personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Is AD status verification provided before performance of staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Is there a system to prohibit hand entries or corrections to technical data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Is technical data stored in a manner that will protect it from dirt and damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13E.	Record Keeping				
1.	Does distributor request adequate test and inspection records with each order of parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are records confirming consumable integrity maintained for a minimum of three (3) years (i.e. chemical and physical properties)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Is traceability and certification documentation maintained for a minimum three (3) years after sale?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Does the vendor's purchase records/sales orders chain of custody lead/traceable to a production approval holder (e.g. PMA, TSO, PC, TC, STC), FAA/NAA certificate holder, or manufacturer of standard parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Do all life-limited parts records confirm their life limited status from previous operator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

6.	Are records protected against damage, alteration, deterioration, and loss?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Can each part, carton, or package of parts be linked to its certification and/or test records by some unique identifier?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Do serviceable parts have airworthiness approval documents attached from an EASA/CAAM/FAA/TCCA certificate holder or air carrier?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Are teardown/strip reports provided for serviceable parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Are parts subjected to extreme stress or heat identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13F.	Training and Authorised Personnel	Yes	No	N/A	Remarks
1.	Are personnel who perform supervisory, inspection, record keeping, parts handling, shipping, and receiving functions properly trained and competent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are certifying/inspection personnel properly authorized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are both formal classroom and on-the-job training documented and maintained for a minimum of three (3) years after the person leaves the company?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13G.	Shelf-Life Control	Yes	No	N/A	Remarks
1.	Is there a documented shelf-life program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is there a list of shelf life-limited materials and parts and their limits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13H.	Measuring and Test Equipment	Yes	No	N/A	Remarks
1.	Does the organisation have the tools required to assure conformity of the inventory to specification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is there a documented program to maintain serviceability and calibration of those tools?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are historical records containing repair and calibration accuracy data for that tooling maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Is the calibration of tools traceable to the National Institute of Standards and Technology, or appropriate governmental or OEM standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	If personally owned measuring tools are allowed on the premises, are they controlled by the program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13I.	Procurement	Yes	No	N/A	Remarks
1.	Are approved quality materials and parts purchased and are proprietary and licensing rights observed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Does the system assure that special requirements are adequately communicated to the distributor's sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are new parts purchased from approved vendors/suppliers authorized by the manufacturer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Is a list of approved vendors/suppliers maintained, including a quality history of each?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13J.	Material Control	Yes	No	N/A	Remarks
1.	Does the organisation provide material certification?				
	a) CAAM Form 1 Authorised Release Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	b) FAA Form 8130-3 Airworthiness Approval Tag	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	c) EASA Form 1 Authorised Release Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	d) TCCA Canada Form 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	e) Certificate of Conformance. (Please provide copy of the CoC template)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	f) Others. (Please specify and attach copy of the document template)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

2.	Are materials handled in an appropriate manner and protected from loss, damage, and deterioration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are the storage areas periodically checked for overall effectiveness?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Are batch/lot control maintained for parts as identified by the manufacturer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Whenever practical, are materials stored and delivered in the manufacturer's original packaging?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Does the system require the packaging to identify the manufacturer, distributor, serial number, etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Does the system assure that no part number ambiguity exists?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Does the system require segregation of nonconforming material from usable stock?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Are there documented procedures in place to mutilate scrapped parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Are there records and documentations to be kept on all serialized scrapped parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Does packaging clearly identify contents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Is material susceptible to electrostatic discharge damage, and flammable, toxic, or volatile material handled in accordance with proper requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13K.	Facilities	Yes	No	N/A	Remarks
1.	Is the facility adequate in size to house all necessary tooling, equipment, material, and parts to perform work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is the environment appropriate to protect workers so that quality of workmanship is not impaired by physical efficiency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Does the facility adequately protect parts, materials and customer units from damage and contamination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Does the facility provide storage facilities for the exclusive use of storing standard parts, spare parts, and raw materials, and separated from working space?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Are good housekeeping and storage practices being maintained to ensure inventory is not damaged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13L.	Storage	Yes	No	N/A	Remarks
1.	Do storage areas provide adequate space and relevant racks to preclude damage or mishandling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is the storage area secure from unauthorised access?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are there segregation of aircraft from non-aircraft parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Are there segregation of serviceable from non-serviceable parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Are there procedures for storage of flammable, toxic or volatile materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Are there procedures for storage and handling of materials against damage by electrostatic discharge?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Are there procedures for storage and handling of materials against corrosion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Are the temperature and humidity in the storage areas controlled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Is the environmental control system periodically checked and calibrated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Are there established procedures to verify, at appropriate intervals, the condition of products in stock in order to detect deterioration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13M.	Audit and Surveillance	Yes	No	N/A	Remarks

1.	Is there an internal surveillance function that audits programs to ensure compliance with customer and regulatory requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are audit results documented including effective corrective action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Is the organisation willing to let the authorities or other interested parties to do audit and surveillance of the quality program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13N.	Scrapped Parts Procedure	Yes	No	N/A	Remarks
1.	Is there a documented procedure in place for mutilating scrapped parts which will preclude their being returned to service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Does the Distributor maintain record of scrapped life limited parts for a minimum of three (3) years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Does the distributor identify the individual responsible for verifying compliance with this procedure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Does the distributor impose the procedure on subcontractors and repair facilities with which they do business?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13O.	Health, Safety and Environment (HSE)	Yes	No	N/A	Remarks
1.	Does the organisation have an HSE program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is the program implemented throughout the entire organisation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Is there an HSE management plan and does it include goals and objectives?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

14. Acknowledgement.

This audit checklist was completed and performed by;

Name:

Signature:

Designation:

Date:

15. Acknowledgement, Verification and Approval. (For GAM Quality Assurance Department Use Only)

a) Remarks/Comment:

b) Performed/Verified By;

c) Approved By;

Name :

Name :

Designation :

Designation :

Date :

Date :

**INSTRUCTION FOR COMPLETING GAM/Q-071,
VENDOR AUDIT CHECKLIST**

Item	Description
1	Enter/print the organisation's name.
2	Enter/print the organisation's business address.
3	Enter/print the organisation's official phone number.
4	Enter/print the organisation's fax number if applicable.
5	Enter/print the organisation's email address.
6	Enter/print the organisation's website.
7	Tick type(s) of business applicable to the organisation.
8	Enter/print the organisation's facility size in square meter. (Please attach copy of the facility layout.)
9	Enter/print total number of the employees in accordance with the descriptions.
10a	Enter/print the principle business of the organisation. i.e., supply of consumables, contractor – component overhaul.
10b	Enter/print the Head of Quality System's name, designation, and contact number.
10c	Enter/print the person to contact with regards to Quality Issue's name, designation, and contact number.
11	Tick the type of Certification/accreditation the organisation hold. (Please attach copies of the current certificate)
12	Tick 'Yes' if the organisation is the approved distributor for any manufacturer and specify accordingly.
13A – 13O	Complete the checklist as applicable. Enter/print remarks if you want to note/add important information.
14	Enter/print the name, designation, signature, and date of the person who completed and performed the audit checklist. The person shall be the Organisation's Quality Management Representative. Indicate N/A if the checklist is completed by the GAM's assigned quality auditor.
15a	Enter/print remarks as applicable. This column shall be filled by the assigned quality auditor.
15b	Enter/print name, designation and date of the person performing or verifying the completed audit checklist. The person shall be the assigned quality auditor.
15c	Enter/print name, designation and date of the person approving the completed audit checklist. The person shall be the QAM.