

Survey of Supplier's Property Control System

Date:
Supplier No:

■ TOP PORTION TO BE COMPLETED BY PRIME ENTITY

SUPPLIER NAME	
PURCHASE ORDER(s)/ CONTRACT NUMBER(s):	
SUPPLIER IDENTIFIER (I.E. CAGE CODE, LOCATION, DIVISION, BUSINESS UNIT)	
ADDRESS	
CITY/STATE/ZIP	
PHONE AND FAX NO.	EMAIL.

Self-Evaluation TO BE COMPLETED BY SUPPLIER Please Type or Print

ACCOUNTABLE SUPPLIER REPRESENTATIVE	TITLE/PHONE/EMAIL
PROPERTY CUSTODIAN (If Different From Above)	TITLE/PHONE/EMAIL

THE FOLLOWING QUESTIONS PERTAIN TO THE MANAGEMENT OF CUSTOMER PROPERTY AT YOUR FACILITY.
PLEASE COMPLETE THIS SURVEY AND RETURN TO: (FILL IN YOUR COMPANY NAME/ADDRESS/ATTENTION)

PLEASE ANSWER EACH QUESTION BY CHECKING THE APPROPRIATE BOX.
IF THE ANSWER IS NO, OR WHEN OTHERWISE REQUESTED, PLEASE EXPLAIN IN THE
COMMENTS SECTION

PROPERTY MANAGEMENT	YES	NO	N/A
1. Do you have written property control system policies and procedures that comply with the purchase order (PO) or subcontract terms and conditions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Has an external entity conducted a property management system analysis at your location within the last two years? What were the results? Adequate ___ Pending ___ Inadequate ___ Other ___ Please provide a copy of the results.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you currently ISO9001 and/or AS9100 certified and can provide a copy upon request? If yes, date certified: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you have a process for immediately reporting to the Buyer any loss, damage, destruction or theft (LDD&T) of customer property in accordance with PO/contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you currently have any outstanding Loss, Damage, or Destruction (LDD) reports in process with our entity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACQUISITION	YES	NO	N/A
6. Has customer property been acquired, including transfers, in accordance with the PO/Contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you acquired any customer property since the last supplier survey? If YES, attach a listing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RECEIVING	YES	NO	N/A
8. Is the carrier's representative's (driver) signature obtained when shortages, or other transit related discrepancies are identified, at the time of delivery, and is the Buyer promptly notified of any such discrepancies when it impacts costs or schedule?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Do you have a process for reporting discrepancies incident to receipt (transit related, shortages, overages, damages) of customer property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Is customer property identified in accordance with the PO/contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RECORDS	YES	NO	N/A
11. Do you have a record system, with supporting documentation, for all customer property in accordance with the PO/contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Does your record system provide for traceability/audit trail of transactions from acquisition through disposition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PHYSICAL INVENTORY	YES	NO	N/A
13. Do you perform periodic physical inventories of customer property? If YES, what is the accuracy rate? a. Material _____ b. Equipment _____ Provide the date of your last inventory: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are sub-tier suppliers required to perform and report inventories?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Have inventory results been reported in accordance with the PO/contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REPORTS	YES	NO	N/A
16. Do you provide reports in accordance with the PO/contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UTILIZATION	YES	NO	N/A
17. Do you have a process to ensure that customer property is only used as authorized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Do you have a process that ensures reasonableness of consumption of customer-owned materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Do you have a process to control the movement and protection of customer property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Is customer property stored in a secure area where it is preserved and protected in accordance with the PO/contract and/or your property procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MAINTENANCE	YES	NO	N/A
21. Check as applicable your method(s) for maintenance of customer property: Preventive Maintenance Schedule <input type="checkbox"/> As Used <input type="checkbox"/> Calibration <input type="checkbox"/> Corrective Maintenance <input type="checkbox"/> Not Required <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Is preventive maintenance performed by qualified personnel and are records available for review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Do you have a calibration recall system which assures that calibration is performed as scheduled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBCONTRACTOR CONTROL	YES	NO	N/A
24. Do you have customer property located at an alternate or sub-tier location?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Do you have a process and/or procedures for the control, protection and maintenance of customer property in possession of your sub-tier suppliers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RELIEF OF STEWARDSHIP	YES	NO	N/A
26. Do you have a process that allows you to identify and report idle, residual or excess customer property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Do you have a disposal and/or scrap process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Is there any customer property in your possession that has not been utilized within the past year and that you consider to be excess to your needs? If YES, have you reported it to the Buyer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PROPERTY CLOSE OUT	YES	NO	N/A
29. Do you have a process to assure that all customer property is returned or disposed of prior to final contract completion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS			

SUPPLIER CERTIFICATION

As an authorized company representative, I hereby certify that the information and documentation provided to us is true and accurate to the best of my knowledge and belief.

Authorized Representative's Name	Title
Signature	Date

PERSON COMPLETING FORM (If different than person completing certification above)

Print Name	Title
Signature	Date