



239 West Grimes Lane  
 Bloomington, IN 47403  
 Main 812-333-6100 - Fax 812-333-6111  
 www.msp-aviation.com

**VENDOR SURVEY AND CERTIFICATION**

<b>Company Name</b>		<b>Contact Name</b>	
<b>Address</b>		<b>City, State, Zip</b>	
<b>Phone Number</b>		<b>Fax Number</b>	
<b>Ownership (nationality / person status) of the Entity is:</b>			
<b>U.S. Owned U.S. Incorporated with Foreign Parent Foreign-Owned:</b>			
<b>1</b>	Do one or more foreign persons have more than 50 percent of the outstanding voting securities of the firm?		
<b>2</b>	Do one or more foreign persons have the authority or ability to establish or direct the general policies or day-to-day operations of the firm?		
<b>3</b>	Do foreign persons own 25 percent or more of the outstanding voting securities?		

**EXPORT / IMPORT / ANTI-CORRUPTION COMPLIANCE CERTIFICATION**

<b>Export Compliance Point of Contact "POC"Name:</b>				
<b>Export POC email:</b>		<b>Export POC phone:</b>		
<b>4</b>	Is your company registered w/ the Directorate of Defense Trade Controls, U.S. Department of State?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, Expiration Date:
<b>5</b>	Does your company employ persons or use contract labor or consultants with citizenship of a country other than the country of incorporation of your business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>6</b>	Does your company perform work at non-U.S. facilities, affiliates or subsidiaries with an address in a country other than the country of incorporation of your business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>7</b>	Will any third party who is a non-U.S. company or who will utilize non-U.S. facilities or non-U.S. persons be involved in any way on any Company transactions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<p>As a duly authorized representative of the company denoted, I certify and warrant the accuracy of all statements herein, represents that it is familiar with the requirements of the U.S. Export regulations, Foreign Corrupt Practices Act and any applicable local or foreign laws, ordinances, and U.S. Government's contracting and subcontracting programs and confirm that our company will comply with all statements herein.</p> <p>I understand that this certification shall apply to all requests for quotations, requests for proposals, purchase orders or subcontracts received from MSP Aviation "MSP" and understand that I am responsible for notifying MSP of any changes in status affecting this certification.</p> <p>I further acknowledge that where information must be exchanged between our company and MSP, regardless of the media or method used to exchange information, we shall preserve in confidence MSP's information and shall, unless otherwise authorized in writing by an authorized agent of MSP, prevent disclosure to third parties. We shall further restrict disclosure of MSP Aviation information to our employees on a need to know basis and will advise the restrictions of disclosure and use. If we determine an unauthorized use or disclosure of MSP's information, we shall promptly notify MSP of the disclosure and shall endeavor to prevent further unauthorized use or disclosure.</p>				
<b>Company Authorized Agent print name:</b>				<b>Date:</b>
<b>Company Authorized Agent signature:</b>				



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**SUPPLIER**

<b>Supplier Type Details</b>	<input type="checkbox"/> Process Facility (IE: Heat Treat, Plating, Welding, NDT, etc.) _____
	<input type="checkbox"/> Manufacturer _____
	<input type="checkbox"/> Raw Materials (IE: Metals, Plastics, etc.) _____
	<input type="checkbox"/> Service Provider (IE: Calibration, Maintenance, etc.)
	<input type="checkbox"/> OEM/Distributor (hardware, consumables, etc.)

Please complete the following questionnaire as accurately as possible. We are in the process of approving your organization as a potential supplier of products or services and need the following information to make our decision. Your response is greatly appreciated within 5 business days.

**Cybersecurity:**  
 Is your company DFAR 252.204.7012 compliant? Yes  No

If yes, What is your current CMMC level?  
 Level 1  Level 2  Level 3  Level 4  Level 5

If no, What is your anticipated CMMC level?  
 Level 1  Level 2  Level 3  Level 4  Level 5  Est. Cert. Date: \_\_\_\_\_

Is your company a Boeing Approved? Yes  No

Is your company Honeywell Approved? Yes  No

Have you read and agree to comply with F.7.4.2, Purchase Order QA Requirements? Yes  No

Have you read and agree to comply with QM-102, Supplier Quality Assurance Manual? Yes  No

**Quality Management System:**  
 Does your organization maintain an accredited quality management system (QMS)?  Yes  No  
 QMS Type:  ISO 9001  SAE AS9100  SAE AS9120  Mil-1-45208-A  Nadcap  
 Other (Please specify):

**If Yes, please attach a current copy of the registration certificate provided by your registrar as well as all other certificates you hold and skip the questionnaire below.**  
**You can email survey to [quality@msp-aviation.com](mailto:quality@msp-aviation.com)**

QUALITY MANAGEMENT SYSTEM QUESTIONNAIRE		Yes	No	N/A
1	Do you have a documented quality management system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Do you allow customers to audit your facilities / processes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Do you have a documented nonconforming material control process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Do you have a documented corrective action process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Do you have a customer complaint process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Do you perform inspection on products or services and are records maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are measuring and test equipment used to inspect product periodically calibrated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Do you retain records of quality activities? How Long? _____ Years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Do you perform internal audits on your internal processes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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10	Are employees competent to perform work affecting product/service quality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supplier Representative Signature				Date
<b>Approval Status</b> (to be completed by our representative)				
<b>Approval Status</b>	<input type="checkbox"/> <b>Accept Supplier</b> <input type="checkbox"/> <b>Reject Supplier</b> <input type="checkbox"/> <b>Probationary Status</b>			
<b>Approval Authority</b>			<b>Date</b>	
<b>NOTE: Supplier Risk must be completed prior to approval.</b>				

**Supplier Risk** (Completed by **MSP Aviation**)

<b>Company Name</b>			
Quality Survey Risk (Check One)	<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> Significant (Describe Below) Check Probationary Status.
Export Compliance Risk	<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> Significant (Describe Below)
Describe Risk Mitigation Program			
Completed By:		Date	
Approved By:			
Export Approval By:			
Comments			