**VENDOR QUALITY SURVEY**

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| ORGANIZATION INFORMATION |
| ORGANIZATION NAME |  | DBA (if applicable) |  |
| FULL ADDRESS (Including country) |  |
| PHONE |  | FAX |  |
| EMAIL |  | BUSINESS START DATE | Choose an item. |
| WEBSITE |  | BUSINESS TYPE |  |
| CAGE CODE |  | TAX ID/EIN |  |
| STANDARD LEAD TIME |  | NAICS/SIC CODE(S) |  |
| PO MIN |  | PAYMENT TERMS  Int’l Vendors: Net Terms or Escrow only |  |
| RFQ/PO CONTACT NAME |  | AR CONTACT NAME |  |
| **RFQ/PO CONTACT EMAIL** |  | **AR CONTACT EMAIL** |  |
| **RFQ/PO CONTACT PHONE** |  | **AR CONTACT PHONE** |  |
| IF AUTHORIZED DISTRIBUTOR – PLEASE LIST MANUFACTURERS |  |
| WOULD YOU LIKE TO BE ADDED TO OUR VENDOR BLAST? |  |
| QUALITY SYSTEMS |
| QUALITY MANAGEMENT CONTACT NAME |  | PHONE |  |
| EMAIL |  |
| DOCUMENTED QUALITY MANAGEMENT SYSTEM (i.e. QUALITY MANUAL) |  [ ] YES [ ] NO [ ] IN PROCESS | IF IN PROCESS DATE OF EXPECTED COMPLETION |  |
| IF CERTIFIED, COMPLETE TABLE BELOW FOR ALL CERTIFICATIONS HELD (\*MUST PROVIDE COPY OF CERTIFICATION(S)) |

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| CERTIFICATION | REGISTRAR | CERTIFICATE # | EXPIRATION |
|  |  |  |  |
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| QUALITY PROCESSES |
| 1. Is there a contract review process; to include key characteristics, quality requirements, shipping, terms, & flowdown requirements?
 |  | 5. Do you monitor the performance of your suppliers to include quality of parts? |  |
| 1. Is there a process to control order changes?
 |  | 6. Do you maintain a FOD free, climate-controlled environment? |  |
| 1. Do you flowdown requirements, including customer and/or government requirements to your suppliers, if required?
 |  | 7. Is product traced by date code/lot #(s) to ensure recall if a nonconformance is found? |  |
| 1. Do you have an approved Vendor list? Is criteria for approval defined?
 |  | 8. Is there a Corrective Action Process? |  |
| 1. Describe your process for handling ESD sensitive devices? Do you package to MSL level?
 |  | 9. Is there a final inspection to ensure all customer PO requirements are met? |  |

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| COUNTERFEIT MITIGATION |
| 10. Please check equipment/test performed during your standard inspection process, as applicable. | [ ] Microscope | [ ]  Caliper | [ ] Decapsulation | [ ]  XRF/RoHS | [ ]  Electrical | [ ]  Xray | [x] Solderability | [ ]  Solvent Test |
| Other: |  |
| 11. Is there a documented counterfeit mitigation plan or inspection procedure? |  |
| 12. Are records kept of the results of these inspections? How long are these records kept? |  |
| 13. Are you AS6081/AS5553 certified? |  |
| 14. What type of controls are in place to prevent the shipment of non-conforming, suspect, fraudulent, or counterfeit parts? Are these parts segregated from conforming parts? |  |
| 15. Are you a member of (select 1 or more if apply) | [ ]  IDEA | [ ]  ERAI | [ ]  GIDEP | [ ]  SMTA |

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| By my signature below I certify the information contained in this survey is true and accurate to the best of my knowledge.I agree to notify Direct Components if any of the information contained on this form should change. |
|  |  |  |  |  |  |  |
| NAME PRINTED |  | TITLE |  | DATE |  | SIGNATURE |

**\*\*\*\*Please return this survey within 10 days to** **purchasing@directics.com** **along with copies of any certifications. \*\*\*\***