

Form No. 233
7-78**VENDOR****SURVEY FORM**

DATE PREPARED _____

COMPANY SURVEYED		
ADDRESS		
CITY	STATE	ZIP CODE
TELEPHONE AC ()	TELEX	

NOTICE:

I (We) certify that the information contained in the attached survey form is accurate and complete as of the date indicated. Where trade secret or other proprietary information is involved, the person interviewed has initialed those responses not verified by the interviewer. All information obtained will be kept confidential. A corporate officer of the company surveyed will review all responses made at the time of survey. This survey has been made with the permission of the company surveyed.

SIGNATURE	TITLE	LOCATION
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PART I — GENERAL INFORMATION

ANNUAL SALES	YEARS IN BUSINESS	PRIVATELY OWNED	SUBSIDIARY, DIVISION, FACILITY OF
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OTHER PLANT
LOCATIONS

LIST MAJOR CUSTOMERS	TYPE OF CONTRACT
_____	_____
_____	_____
_____	_____
NOT AVAILABLE <input type="checkbox"/>	NOT AVAILABLE <input type="checkbox"/>

LIST COMPANY MANAGEMENT	NAME	TITLE	INTERVIEWED
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

PRODUCTS FOR
WHICH SURVEY
WAS PERFORMED
(ATTACH LABELING)

TOTAL NUMBER EMPLOYEES _____ LABOR RATIO OF SUPERVISORS _____ TO PRODUCTION PERSONNEL _____

WORK SCHEDULE HOURS _____ NUMBER SHIFTS _____ DAYS PER WEEK _____

ARE TRAINING PROGRAMS FOR PERSONNEL UTILIZED Yes ☐ No ☐**FACILITY**NUMBER BUILDINGS ON SITE _____ TYPE (SINGLE/MULTISTORY;
WOOD/BRICK/BLOCK/STEEL) _____LOCATION IN INDUSTRIAL PARK ☐ URBAN ☐ SUBURBAN ☐ RURAL ☐ EQUIPMENT OWNED OR LEASED _____

SQUARE FOOTAGE IN MANUFACTURING _____ ADMINISTRATION _____ STORAGE _____ ENGINEERING, R&D _____

LIST PROCESS CAPABILITIES AND SPECIAL MANUFACTURING EQUIPMENT ESSENTIAL TO MATERIALS BEING PROCURED.

1. _____
2. _____
3. _____
4. _____
5. _____

IS THERE A DOCUMENT/PROCESS FLOW MANUAL OUTLINING ALL MANUFACTURING STEPS, RECORDS, AND CONTROLS FROM RAW MATERIALS TO FINISHED PRODUCT (AS REQUIRED FOR SOME GOVERNMENT CONTRACTS)

Yes ☐ No ☐

DOES THE MANUFACTURER HAVE LIABILITY INSURANCE INSURED BY _____

Yes ☐ No ☐

LIST MANUFACTURING DONE BY OUTSIDE SOURCES (SUBASSEMBLY, PACKAGING, KIT ASSEMBLY, ETC.)

1. _____
2. _____
3. _____
4. _____
5. _____

HAS THE MANUFACTURER BEEN INSPECTED BY ANY STATE OR FEDERAL AGENCIES WITHIN THE LAST TWO YEARS

Yes ☐ No ☐

NAME OF AGENCIES _____

WERE RECALLS INVOLVED

Yes ☐ No ☐

COMMENTS _____

PART II — RAW MATERIALS AND COMPONENTS CONTROL

PURCHASING

IS QUALIFICATION BASED ON WRITTEN SPECIFICATIONS, AND APPROVAL OF VENDOR SOURCES

Yes ☐ No ☐

ARE REJECT/ACCEPT LIMITS SHOWN

Yes ☐ No ☐

IS APPROVAL BASED ON

QUALITY HISTORY CARDS ☐

SUPPLIERS CERTIFICATE ☐

ON SITE SURVEY ☐

OWN QC TESTING ☐

OTHER _____

ARE SPECIFICATION CHANGES REVIEWED AND SIGNED OFF BY QC PERSONNEL

Yes ☐ No ☐

TESTING

ARE WRITTEN TEST PROCEDURES IN USE

Yes ☐ No ☐

TEST RESULTS ON FILE

Yes ☐ No ☐

SAMPLING PLAN USED

100% ☐

MIL SPEC ☐

AQL ☐

RANDOM ☐

OTHER _____

DO TEST RESULTS INDICATE

QUANTITY SAMPLED ☐

METHOD OF ANALYSIS ☐

DATE & SIGNATURE OF ANALYST ☐

SAMPLE TRACEABILITY ☐

IS THERE A RETENTION SAMPLE SYSTEM FOR RAW MATERIALS/COMPONENTS

Yes ☐ No ☐

IN PLANT CONTROL

MATERIAL ASSIGNED ALPHA-NUMERIC OR IDENTIFYING MARK FOR EACH INCOMING LOT

Yes ☐ No ☐

MATERIAL VISIBLY MARKED AS

SAMPLED ☐ APPROVED ☐ REJECTED ☐ NOT MARKED ☐

INVENTORY LOG OR RECORD KEPT

Yes ☐ No ☐

STORAGE AREA SEPARATE

Yes ☐ No ☐

SEGREGATED WITHIN STORAGE AREA

Yes ☐ No ☐

STOCK ROTATION (FIFO) SYSTEM USED

Yes ☐ No ☐

AUTHORIZED CUSTODIAN CONTROL

Yes ☐ No ☐

GENERAL HOUSEKEEPING NEAT AND ORDERLY

Yes ☐ No ☐

REJECTED MATERIALS ARE:

CLEARLY IDENTIFIED

Yes ☐ No ☐

PHYSICALLY SEGREGATED

Yes ☐ No ☐

PART III — MANUFACTURING

MASTER PRODUCTION RECORDS

IS THERE A SINGLE CONTROLLED FILE OF MASTER RECORDS FOR EACH PRODUCT

Yes ☐ No ☐

BATCH SHEETS ☐

LINE ENGINEERING, ASSEMBLY DRAWINGS ☐

OTHER _____

ARE THESE MASTER RECORDS SIGNED AND DATED

Yes ☐ No ☐

DOUBLE SIGNATURE ☐

REVISION DATES ☐

ARE THE PROCESS, ASSEMBLY, OR MANUFACTURING STEPS FULLY DESCRIBED:

IN THE MASTER PRODUCTION RECORD

Yes ☐ No ☐

IN A SEPARATE DOCUMENT OR RECORD

Yes ☐ No ☐

IS THERE A MASTER DOCUMENT TO INDICATE:

QC POINTS FOR IN-PROCESS
MANUFACTURINGYes ☐ No ☐TYPE OF TEST OR INSPECTION TO BE
MADEYes ☐ No ☐

METHOD OF MEASUREMENT

Yes ☐ No ☐

WHO PERFORMS TEST OR INSPECTION

Yes ☐ No ☐

LEVEL OF ACCEPT/REJECT (LIMITS)

Yes ☐ No ☐FOR MANUFACTURING, PROCESSING, SUBASSEMBLY, OR
PACKAGING DONE BY OUTSIDE SOURCES, ARE THERE:

MASTER PRODUCTION RECORDS

Yes ☐ No ☐QC SPECIFICATIONS AND METHODS
RECORDSYes ☐ No ☐

OUTSIDE SOURCES NOT USED

Yes ☐ No ☐**PRODUCTION AREA**

IS THE WORK FLOW ORGANIZED

Yes ☐ No ☐DISTINCT STAGING AREA FOR RAW
MATERIALS OR COMPONENTS USED IN
MANUFACTURINGYes ☐ No ☐PRODUCTION OR ASSEMBLY LINES
SEGREGATEDYes ☐ No ☐GENERAL HOUSEKEEPING AND
ENVIRONMENTAL FACTORS GOODYes ☐ No ☐WRITTEN PROCEDURES FOR PLANT
SANITATION AVAILABLEYes ☐ No ☐**PRODUCTION EQUIPMENT**MAINTENANCE OR SERVICE RECORDS
AVAILABLEYes ☐ No ☐CALIBRATION RECORDS KEPT ON
PERIODIC BASISYes ☐ No ☐MEANS OF READILY IDENTIFYING TYPE
AND STAGE OF PROCESSING BEING
DONE ON THE EQUIPMENTYes ☐ No ☐**PRODUCTION RECORDS**ARE PRODUCTION DOCUMENTS
COLLECTED AND FILEDYes ☐ No ☐

KEPT _____ (YEARS)

COMPLETE LABELING SAMPLES
HISTORY ☐ INCLUDED ☐TRACEABILITY BY LOT
OR SERIAL NUMBER ☐PARTIAL HISTORY ☐**PACKAGING**ARE FINISHED GOODS PACKAGING
OPERATIONS SEGREGATEDYes ☐ No ☐

UNDER SUPERVISED CONTROL

Yes ☐ No ☐

LABEL RECORDS KEPT

Yes ☐ No ☐PRE-LABEL COUNT ☐ RECONCILIATION ☐ARE FINISHED GOODS PROPERLY
IDENTIFIED, LABELED, AND STOREDYes ☐ No ☐PRIOR TO
RELEASE ☐AFTER
RELEASE ☐**REJECTED MATERIALS**ARE THERE WRITTEN PROCEDURES
FOR DISPOSING OF OR REWORKING
REJECTED ITEMSYes ☐ No ☐ARE REJECTED PRODUCTS HELD IN
QUARANTINE PENDING FINAL
DISPOSALYes ☐ No ☐SEGREGATED
AREA ☐SPECIAL
MARKINGS ☐**RETENTION SAMPLES**ARE SAMPLES OF FINISHED GOODS
RETAINEDYes ☐ No ☐FROM EACH PRODUCTION RUN ☐IN A SEPARATE CONTROLLED AREA ☐IN THE SAME CONTAINER/CLOSURE
SYSTEM IN WHICH THEY ARE SOLD ☐IN CONTAINERS DIFFERENT FROM UNIT
AS SOLD ☐

KEPT FOR A PERIOD OF _____ (YEARS)

WRITTEN LOG OR FILE ☐**STERILE COMPONENTS (IF APPLICABLE)**ARE THERE PROCEDURES FOR
ESTABLISHING AND MAINTAINING
ASEPTIC CONDITIONSYes ☐ No ☐ARE METHODS FOR ROUTINE AUDITING
OF STERILE AREAS USEDYes ☐ No ☐ARE THERE PROCEDURES FOR
WORKING IN STERILE AREASYes ☐ No ☐FOR CLEANING AND STERILIZATION OF
EQUIPMENTYes ☐ No ☐FOR BULK AND FINAL PRODUCT
STERILITY TESTINGYes ☐ No ☐IS PROCESS STERILITY FOR EACH RUN
DOCUMENTED IN THE PRODUCTION
RECORDSYes ☐ No ☐**STERILE PROCESS USED**ETO ☐ RADIATION ☐ STEAM ☐ FILTRATION ☐CHEMICAL ☐ OTHER _____**PART IV — QUALITY CONTROL/ASSURANCE****ORGANIZATION AND FUNCTION**DOES THE QUALITY
CONTROL-INSPECTION GROUP
REPORT DIRECTLY TO THE TOP,
INDEPENDENT OF PRODUCTION,
MARKETING, OR OTHER
ORGANIZATION GROUPS WITHIN THE
MANUFACTURING COMPANY. (SEE
COMPANY ORGANIZATION CHART)Yes ☐ No ☐DOES THE QUALITY
CONTROL-INSPECTION GROUP HAVE FULL AUTHORITY
TO WITHHOLD SHIPMENT OR FURTHER PRODUCTION
OF REJECTED ITEMSYes ☐ No ☐

ARE THE QUALITY CONTROL PROCEDURES:

IN A FORMAL WRITTEN DOCUMENT

Yes ☐ No ☐

REVISED ON A PERIODIC BASIS

Yes ☐ No ☐DOES THE QUALITY CONTROL/ASSURANCE-INSPECTION
GROUP HAVE:ADEQUATE EDUCATION, TRAINING OR
EXPERIENCEYes ☐ No ☐

UNDERSTANDING OF THEIR FUNCTION Yes ☐ No ☐ OTHER _____

OPERATIONS

ARE STAMPS, TAGS, MARKERS, ETC., USED TO VERIFY INSPECTION ACTIVITY Yes ☐ No ☐

ARE THE MARKINGS USED TRACEABLE TO AN INDIVIDUAL INSPECTOR Yes ☐ No ☐

ARE PRODUCTION SAMPLES FOR QC TESTING: ADEQUATELY IDENTIFIED AS TO SOURCE Yes ☐ No ☐

RECORDED SOMEWHERE AT TIME OF SAMPLING Yes ☐ No ☐

ENTERED ON FILED TEST REPORT Yes ☐ No ☐

WRITTEN SAMPLING PLAN BASED ON:

100% ☐ MIL SPEC ☐ AQL ☐ RANDOM ☐

IS THE PRODUCT USED TESTED PRIOR TO FINAL RELEASE Yes ☐ No ☐

ARE OUTSIDE SOURCES USED FOR PRODUCTION TESTING Yes ☐ No ☐

UNDER FORMAL CONTRACT ☐

USE TEST PROTOCOLS OR WRITTEN PROCEDURES ☐

COPIES IN THE MANUFACTURING FILES ☐

FACILITY REGISTERED OR LICENSED BY ANY FEDERAL, STATE OR PROFESSIONAL AGENCY ☐

OUTSIDE TEST RESULTS FILED BY THE MANUFACTURER ☐

IS THERE A FORMAL QUALITY ASSURANCE PROGRAM INVOLVING PERFORMANCE TESTING OF THE PRODUCT(S) AFTER RELEASE Yes ☐ No ☐

PART V — CUSTOMER COMPLAINTS AND RECALL CAPABILITIES

CUSTOMER COMPLAINTS

IS THERE AN ORGANIZED COMPLAINT FILE Yes ☐ No ☐

DOES EACH COMPLAINT STATE: NATURE OF COMPLAINT ☐

RESPONSE TO CUSTOMER (REPAIR, REFUND, REPLACE) ☐

FURTHER CORRECTIVE/PREVENTIVE ACTION BY MANUFACTURER ☐

COMPLAINT FILES KEPT FOR _____ (YEARS)

IS THERE A PERIODIC REVIEW OF COMPLAINT FILES FOR TRENDS Yes ☐ No ☐

IS THE REVIEW FILE AS A WRITTEN SUMMARY Yes ☐ No ☐

IS THERE A GROUP OR INDIVIDUAL ASSIGNED TO HANDLE CUSTOMER INQUIRIES AND FOLLOW UP ON COMPLAINTS Yes ☐ No ☐

ARE PRODUCT DEFECTS VERIFIED BY MANUFACTURER THROUGH TESTING Yes ☐ No ☐

WAS REVIEW OF COMPLAINT FILES FOR SURVEY PRODUCT MADE Yes ☐ No ☐

RECALL CAPABILITIES

IS THERE A COMPANY RECALL PLAN Yes ☐ No ☐

SHOWS HOW DECISIONS ARE MADE AND BY WHOM ☐

HOW RECALL WILL BE ACCOMPLISHED ☐

INSTRUCTIONS FOR RECOVERY AND ACCOUNTABILITY OF RECALLED PRODUCT ☐

DO SHIPPING OR DISTRIBUTION RECORDS ON FILE SHOW: CUSTOMER OR DISTRIBUTOR NAME AND ADDRESS Yes ☐ No ☐

DATE OF SHIPMENTS AND QUANTITY SHIPPED Yes ☐ No ☐

LOT OR SERIAL NUMBER OF PRODUCT SHIPPED Yes ☐ No ☐

DISTRIBUTION RECORDS ARE MAINTAINED _____ (YEARS)

DISTRIBUTION RECORDS ARE STORED AS: COMPUTER LISTING ☐

MICROFILM/MICROFICHE ☐

MANUAL CARD/PAPER FILES ☐

PART VI — REGULATORY COMPLIANCE

IS THE PLANT REGISTERED AS A DEVICE MANUFACTURER Yes ☐ No ☐

ARE THE SURVEY PRODUCT(S) LISTED WITH BUREAU OF MEDICAL DEVICES Yes ☐ No ☐

ARE ALL NECESSARY APPROVALS FOR MARKETING PRODUCTS AVAILABLE Yes ☐ No ☐

IS THERE A FILE WITH PAST AND CURRENT LABELING FOR EACH SURVEY PRODUCT Yes ☐ No ☐

IS THERE A FORMAL AUDITING PROGRAM OF THE QC OPERATION, IF SO, DONE BY WHOM Yes ☐ No ☐

LIST OF ATTACHMENTS AND COMMENTS
