

**Fieldtech Avionics and Instruments, Inc.**  
**4151 North Main St. Fort Worth, Texas 76106**

**Quality Assurance Vendor Self Audit Questionnaire**

Return by fax: 817-625-6875 or email: qa@ftav.com

Date of Audit Jan 04, 2021  
Company Name Fieldtech Avionics & Instruments Inc.  
Address 4151 North Main st.  
Fort Worth, TX 76106  
Company Website www.ftav.com  
Email Addresses Quality qa@ftav.com  
General sales@ftav.com  
Phone 817-625-2719 Fax 817-625-6875  
Years in Business 45 Number of Employees 68 Inspection 12 Production 23  
Facilities: Sq. Ft 22000 Type Metal Hangar/Brick office  
Does your company qualify as a small business as defined by federal law?  Yes No  
Has your facility been audited for quality systems within the last 12 months?  Yes No  
If yes, by who? FAA

**Indicate Type of Business**

Repair/Overhaul  Manufacturer  Distributor/supplier  Calibration   
PMA or TSO \_\_\_\_\_ OEM \_\_\_\_\_ Other (please specify) Antenna Refurbishment  
Principal product or services Repair/Overhaul, Sales, & Installation of Avionics Systems  
FAR 145 Yes FAA Class and rating Radio Class 1,2,3 Instrument Class 1,2,3,4  
Date of Last FAA audit November 03, 2020  
Name of FAA PMI or PAI Daniel Bonilla  
Has the FAA ever investigated your facility (other than audit)?  Yes No  
If YES, please explain Former disgruntled employee filed unfounded complaint  
Do you have a Drug Plan/AMPP  Yes No Plan ID # E-SW-00099  
EASA-145 Ref. No EASA.145.4443 Valid until August 2022  
CAA N/A Number \_\_\_\_\_  
Are you ASA100 registered  Yes No

**Key Management Contacts**

President Kevin Nelms Service Manager David Duncan  
General Manager Trina Click Q.A. Manager Randy Cross  
Sales Donna Hutchison Accts. Payable Gwen Grimes

**Box for Fieldtech quality department use only**

<b>Recommended Disposition:</b> _____	
<b>Conditions:</b> _____	
<b>Evaluated by:</b> _____	<b>Date:</b> _____
<b>Approved by:</b> _____	<b>Date:</b> _____

**PROGRAMS**  
**Check if in full compliance**

- |  |   |
|--|---|
| <input type="checkbox"/> MIL-Q-9858A                       | <input type="checkbox"/> MIL-I-45208A               |
| <input type="checkbox"/> ANSI/NCSL Z540-1                  | <input type="checkbox"/> MIL-STD-45662A             |
| <input checked="" type="checkbox"/> DOT/FAA ANTI-DRUG/AMPP | <input type="checkbox"/> ISO 9000 series            |
| <input checked="" type="checkbox"/> ASA 100 (AC 00-56)     | <input type="checkbox"/> ISO 17025                  |
| <input type="checkbox"/> ISO 10012-1                       | <input type="checkbox"/> OTHER (list if applicable) |
- 

**Processing Facilities and Controlling Spec.**

- |  |   |
|--|---|
| <input type="checkbox"/> HEAT TREATING | <input type="checkbox"/> WELDING            |
| <input type="checkbox"/> PLATING       | <input type="checkbox"/> CHEMICAL FILMS     |
| <input type="checkbox"/> PEENING       | <input type="checkbox"/> STRIPPING/CLEANING |
| <input type="checkbox"/> FINISH        | <input type="checkbox"/> OTHER (list)       |
- 

**Non-Destructive Testing**

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> MAGNETIC PARTICLE | <input type="checkbox"/> PENETRANT    |
| <input type="checkbox"/> RADIOGRAPHIC      | <input type="checkbox"/> ULTRASONIC   |
| <input type="checkbox"/> EDDY CURRENT      | <input type="checkbox"/> HARDNESS     |
| <input type="checkbox"/> PRESSURE TESTING  | <input type="checkbox"/> OTHER (list) |
- 

**QUALITY ASSURANCE**

(Circle appropriate response.)

- |   |                                     |    |     |
|---|-------------------------------------|----|-----|
| 1. Is there an established, documented Quality Program covering all phases of operation?                          | <input checked="" type="checkbox"/> | No | N/A |
| 2. Does the supplier have a current Quality Manual?   | <input checked="" type="checkbox"/> | No | N/A |
| 3. Are copies of Quality Manual available to all employees?   | <input checked="" type="checkbox"/> | No | N/A |
| 4. Does the supplier have an Internal Audit Program?  | <input checked="" type="checkbox"/> | No | N/A |
| 5. Does the Internal Audit Program ensure compliance with customer specifications?                                | <input checked="" type="checkbox"/> | No | N/A |
| 6. Does the Internal Audit Program ensure appropriate corrective actions?   | <input checked="" type="checkbox"/> | No | N/A |
| 7. Do supervisors have A&P or Repairman Certificates?   | <input checked="" type="checkbox"/> | No | N/A |
| 8. Does the supplier have a program to provide corrective actions for discrepancies noted during repair/overhaul? | <input checked="" type="checkbox"/> | No | N/A |
| 9. Does the supplier have an Approved Vendor List?  | <input checked="" type="checkbox"/> | No | N/A |
| 10. Does the supplier have a program that ensures sub-contractor quality meets customer specifications?           | <input checked="" type="checkbox"/> | No | N/A |
| 11. Does the supplier maintain certification on sub-contracted work?  | <input checked="" type="checkbox"/> | No | N/A |
| 12. Does the supplier have a program to report defects or unairworthy conditions?                                 | <input checked="" type="checkbox"/> | No | N/A |

## Inspections

- |  |   |  |     |
|--|---|--|-----|
| 1. Does the supplier perform RII for any customers?  | Yes                                     | <input checked="" type="checkbox"/> No | N/A |
| 2. Is there proper separation between maintenance and inspection responsibilities?                           | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 3. Does the Repair Station Roster identify all personnel with Return To Service authorization?               | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 4. Does the repair station have an employment summary for all personnel listed on the Repair Station Roster? | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 5. Does the supplier have an acceptable receiving inspection program?  | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 6. Does the supplier have an acceptable procedure to identify customer parts?                                | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 7. Does the supplier maintain traceability certification on all parts?                                       | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 8. Are inspection stamps used for inspections?   | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 9. Do records show inspection status throughout the work process?  | <input checked="" type="checkbox"/> Yes | No                                     | N/A |
| 10. Do you agree to permit the FAA to inspect your facility?   | <input checked="" type="checkbox"/> Yes | No                                     | N/A |

## Technical Data Control

- |   |   |    |     |
|---|---|----|-----|
| 1. Does the supplier have the required shop manuals and specifications to perform the repair/overhaul in accordance with customer requirements? | <input checked="" type="checkbox"/> Yes | No | N/A |
| 2. Are there established, approved procedures for controlling revisions?  | <input checked="" type="checkbox"/> Yes | No | N/A |
| 3. Does the supplier have a system to ensure technical data is current?   | <input checked="" type="checkbox"/> Yes | No | N/A |
| 4. Does the supplier maintain a record of manual revisions?   | <input checked="" type="checkbox"/> Yes | No | N/A |
| 5. Are manual revisions up to date?   | <input checked="" type="checkbox"/> Yes | No | N/A |
| 6. Are manuals identified and available to technicians?   | <input checked="" type="checkbox"/> Yes | No | N/A |
| 7. Is a system in place to ensure master and working copies are updated at the same time?   | <input checked="" type="checkbox"/> Yes | No | N/A |
| 8. Is technical data stored in a manner to prevent damage?  | <input checked="" type="checkbox"/> Yes | No | N/A |
| 9. Is a specific individual, by title, responsible for the technical data?  | <input checked="" type="checkbox"/> Yes | No | N/A |

## Shelf Life

- |  |   |    |     |
|--|---|----|-----|
| 1. Does the supplier have a shelf life program?                                | <input checked="" type="checkbox"/> Yes | No | N/A |
| 2. Does the program list all parts and materials that have a shelf life limit? | <input checked="" type="checkbox"/> Yes | No | N/A |
| 3. Is a specific individual, by title, responsible for the shelf life program? | <input checked="" type="checkbox"/> Yes | No | N/A |
| 4. Does each shelf life item have expiration date displayed?                   | <input checked="" type="checkbox"/> Yes | No | N/A |
| 5. Is there a system to control expired items?                                 | <input checked="" type="checkbox"/> Yes | No | N/A |

## Tool and Equipment Calibration

1. Does the supplier have a tool/test equipment calibration program?  Yes No N/A
2. Is there an individual, by title, responsible for the calibration program?  Yes No N/A
3. Are all tools listed on the tool calibration list?  Yes No N/A
4. Are the standards used to check tool calibration traceable to the controlling government agency (NIST)?  Yes No N/A
5. Is there a system to identify all tools in the program, calibration, frequency and the next calibration due date?  Yes No N/A
6. Does the supplier have a procedure to prevent "out of service" or equipment due to be calibrated from being used?  Yes No N/A
7. Are personal tools included in the calibration program?  Yes No N/A
8. Do Calibration records contain the following:
  - a) Date of calibration  Yes No N/A
  - b) Supplier that performed the calibration  Yes No N/A
  - c) Next calibration due date  Yes No N/A
  - d) A calibration certificate for each item processed by an outside agency  Yes No N/A
  - e) Part number, serial number and calibration due date of the standard used  Yes No N/A

## Training

1. Does the supplier have a documented training program?  Yes No N/A
2. Does the program include all mechanics, inspectors and supervisors?  Yes No N/A
3. Are both formal and OJT documented?  Yes No N/A
4. Are training records retained for two years after employees leave the company?  Yes No N/A

## Housing and Facilities

1. Are facilities of adequate size to house all necessary tools, equipment and material required to perform the work?  Yes No N/A
2. Does the facility adequately protect parts and customer units from damage, theft, and contamination?  Yes No N/A
3. Is the facility environmentally adequate to protect workers so that the quality of workmanship is not impaired?  Yes No N/A
4. Are storage facilities separate from work areas?  Yes No N/A
5. Do shipping and receiving areas have adequate space, security and fire protection?  Yes No N/A
6. Are the facility work areas and offices clean?  Yes No N/A

## Safety/Security/Fire Protection

1. Does the supplier have adequate protection for customer parts?  Yes No N/A
2. Is the security system reviewed periodically by management or an outside agency?  Yes No N/A
3. Are fire protection devices inspected?  Yes No N/A
4. Are fire extinguishers identified and in serviceable condition?  Yes No N/A
5. Are fire lanes, doors, exits and fire extinguishers clear of obstructions?  Yes No N/A
6. Are required safety guards in place on power equipment?  Yes No N/A
7. Are safety equipment, ladders, signs etc. inspected periodically?  Yes No N/A

## Storage

1. Are parts and material properly identified and stored?  Yes No N/A
2. Is there an adequate, secure area for quarantine of rejected parts and equipment awaiting disposition?  Yes No N/A
3. Do part numbers match the part number on the bins?  Yes No N/A
4. Are parts and material properly protected from damage (ESD)?  Yes No N/A
5. Are flammable, toxic and volatile materials properly stored & identified?  Yes No N/A
6. Are sensitive parts and equipment (oxygen parts, o-rings, electrostatic sensitive devices) properly identified, handled, and stored to protect from damage and contamination?  Yes No N/A
7. Are oxygen and other high-pressure bottles properly marked and stored?  Yes No N/A

## Work Processing

1. Does the supplier have adequate, serviceable tooling and test equipment to perform the work?  Yes No N/A
2. If the supplier uses test equipment that differs from that specified by the OEM:
  - a. Is it properly certified as equivalent?  Yes No N/A
  - b. Does the supplier have operating and maintenance manuals?  Yes No N/A
  - c. Is maintenance and service performed in accordance with the manual?  Yes No N/A
  - d. Are all maintenance and service actions recorded and are records kept for at least two years?  Yes No N/A
  - e. Are calibration standards removed from general use outside of the calibration program?  Yes No N/A
  - f. Has special equipment been approved by the FAA?  Yes No N/A
3. Are mechanics, inspectors, and supervisors properly trained, authorized, and properly certified for the work they perform or inspect?  Yes No N/A
4. Are adequate tools and current manuals available for mechanics at their workstations?  Yes No N/A
5. Are customer parts properly identified during all maintenance & storage?  Yes No N/A
6. When required, is there a work turnover procedure utilized?  Yes No N/A
7. Are serviceable and unserviceable parts identified and segregated?  Yes No N/A

8. Does the facility provide adequate protection of parts while in work? (filtered air, clean room, ESD protection, etc.)  Yes No N/A
9. Are smoking, eating and drinking forbidden in work areas?  Yes No N/A
10. Are fluid dispensing containers and servicing units properly identified?  Yes No N/A
11. Are work records complete, in order and legible?  Yes No N/A
12. Do all records contain the following:
- a. A description of the work performed  Yes No N/A
  - b. A reference to the acceptable data  Yes No N/A
  - c. The date work was accomplished  Yes No N/A
  - d. A record of the person performing the work  Yes No N/A
  - e. The name of the person inspecting the work  Yes No N/A
  - f. The name of the person who performed and supervised the work  Yes No N/A
  - g. The signature, Certificate type, and number of the person returning the article to service  Yes No N/A
13. Are all test and inspection records contained in the work package?  Yes No N/A
14. Does the supplier record keeping system meet FAR and customer requirements?  Yes No N/A
15. Does the return to service documents meet FAA and customer requirements?  Yes No N/A

### Shipping

1. Are components shipped in appropriate shipping containers?  Yes No N/A
2. Does the supplier verify that the identifying data (part number, serial number, nomenclature, modification status, etc.) on the return to service documents and the data plate match?  Yes No N/A

### Scrap Parts

1. Does the supplier have a documented procedure to assure that scrapped parts are returned to the customer or destroyed beyond repair?  Yes No N/A
2. Does the program identify a person, by title, responsible for verifying that the unit has been destroyed beyond repair?  Yes No N/A
3. Does the supplier maintain records for two years on all life limited parts which are scrapped?  Yes No N/A
4. Does the program record the part number, serial number and date the part was scrapped?  Yes No N/A

**The answers to the previous questions are correct to the best of my knowledge.**

Auditor Name (Print): Randy Cross Title: Quality Assurance Manager

Signature of Auditor: *Randy Cross* Date: January 04, 2021