

OVERVIEW PROCESS AUDIT COVER SHEET

Supplier: _____

I.D. No.: _____

CAGE: _____

Address Audited: _____

Audited by: _____ Lead _____ Date/s Audited: _____

DCMA REP: _____ Phone: _____ E-mail: _____

DCMA Participated: ____YES____NO

Applicable Contract/Purchase Order: _____

Supplier Personnel Contacted:

Name:	Title:	Phone:	Fax:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Supplier Product/Capability Overview:

Indicate applicable Processes Audited this date: (circle): (S)-Satisfactory, (U)-Unsatisfactory, (NA) –Not applicable- i.e. Supplier does NOT have this process, (P) – Partial, (O) – Process is Offloaded to another company. For Processes offloaded, indicate the sub-tier supplier with the use of an "*" in auditor's assessment.

1	Metallurgy/Chem Lab Test	S	U	NA	P	O
2	Hydrostatic Testing	S	U	NA	P	O
3	Nondestructive Testing	S	U	NA	P	O
3L	HII/EB NDT Lite	S	U	NA	P	O
4	Calibration	S	U	NA	P	O
5	Inspection & Testing	S	U	NA	P	O
6	Material Control	S	U	NA	P	O
7	Documents & Data Control	S	U	NA	P	O
8	Painting/Surface Prep	S	U	NA	P	O
9	Control of Supplies/Subcontractors Flow down of Customer Requirements	S	U	NA	P	O
10	First Article, FAT & IAT	S	U	NA	P	O
11	Receiving Inspection	S	U	NA	P	O
12	Nonconforming Material Control	S	U	NA	P	O
13	Component/System Cleanliness	S	U	NA	P	O
14	Torque	S	U	NA	P	O
15	Control of OQE	S	U	NA	P	O
16	Packaging & Preservation	S	U	NA	P	O
17	Final/Ship out Inspection	S	U	NA	P	O
18	Electrical Testing	S	U	NA	P	O
19	Flame Spray	S	U	NA	P	O
20	Customer Contract/PO Review	S	U	NA	P	O
21	Internal Quality Audits	S	U	NA	P	O
22	Welding	S	U	NA	P	O
22L	HII/EB Welding Lite	S	U	NA	P	O
23	Heat Treat	S	U	NA	P	O
24	Plating	S	U	NA	P	O
25	Soldering	S	U	NA	P	O
26	Fastener Testing	S	U	NA	P	O
27	Teflon Coating	S	U	NA	P	O
28	Brazing	S	U	NA	P	O
29	Foundry	S	U	NA	P	O

INSPECTION SYSTEM INDICATOR:	___ ISO 9000	___ MIL-I-45208	___ MIL-Q-9858
CALIBRATION SYSTEM INDICATOR	___ ISO 10012	___ ANSI Z540	___ MIL-STD-45662

Auditor's Overall Assessment:

Audit Results: _____ Sat _____ Unsat _____ Marginal

Auditor's Signature/Date: _____

Applicable Corrective Action (SCAR) Number/s: (Attach copy) _____

Response Due: _____

Follow-up Required? _____ Yes _____ No

Follow-up Date: _____

Proc D Input Complete: _____ (EBC ONLY): _____
Date Initials

Administrative Instructions: NOTE – Questions on these auditor guidelines are prioritized A, B or C with “A” assigned the highest priority. This guide is for information to assist the auditor completion of the more critical process questions under time constraints. Questions that are coded “A” must always be answered. Checklists without a Priority Code assigned to questions are assumed to contain all “A” questions.

1. Respond to each checklist question: Make specific observations to support each response and support the response below each question with some applicable objective data observed; e.g.
 - a) For procedure questions, provide procedure number, revision and date.
 - b) For hardware related observations, identify specific hardware observed, citing drawings and piece number, part number, heat, batch or lot.
 - c) For test data observations, identify applicable traceability number.
 - d) For observations involving equipment, identify the make, model and/or serial number of the equipment sighted.
 - e) All UNSATs must be explained
 - f) All “NO’s” must be explained
2. Blanks are provided at the end of each checklist to add appropriate extra questions, comments and concerns.
3. Complete the cover sheet. When performing a complete review of all processes, indicate NA for processes the supplier does not have. Indicate “P” Partial if part of a process was reviewed. Indicate “O” if the process is offloaded/subcontracted to another company. When reviewing Offloaded processes, request names of subcontractors and document same on Cover Sheet. The Cover Sheet is your Audit summary, results of which are entered into a Shared Database viewable by all Supplier Audit Team members. The majority of the blocks are mandatory, thus when an auditor leaves the “**Supplier Product/Capability Overview**” blank, those audits are entered by clerical staff as “Auditor left blank”. When DCMA is the auditor, “**audited by**” and DCMA Rep may be the same person. **Supplier Product/Capability Overview** should state a brief description of what the supplier makes and how the supplier makes the item. Examples might be – “Manufacturer of Navy Standard Valves – Performs welding and Nondestructive testing.” Or “Machine Shop – Speciality is major superstructure” or “Speciality Fastener Manufacturer”. **Inspection System Indicator** and **Calibration System Indicator** are also mandatory fields and must be answered. Failure by the auditor to specify same will result in an audit entered into the system as “Other – Auditor failed to answer”. Questions regarding completion of the Cover Sheet should be directed to the Supplier Audit Team Lead Representative for that Supplier. If the CAGE Code is unknown, ask the supplier representative and assure that it agrees with the referenced Contract.
4. Originate Corrective Action Reports for violations of purchase order/contract requirements.
5. Questions should be referred to Supervision.
6. Continuation sheets are to be used if required. Number each continuation sheet with an “A” page number, corresponding to the page the answer is on. Mark the question number/s to correspond to the answer provided.
7. There are no references to MIL-I-45208 and MIL-Q-9858. ISO references are provided as a guide only. A “No” answer, therefore, is not necessarily an Unsatisfactory condition if ISO is not contractually invoked.

8. Witnessing activities/processes is always preferred in lieu of verification by review of objective quality evidence.

9. Sample plans and size of the auditor's sample is a judgement decision by the auditor based on the company's/agencies' internal procedures. The recording of sample size is required for later audit.