VENDOR OFFLOAD CHECKLIST

AERO GEAR

VENDOR _____ **P.O. #** _____

AG# _____ **RUN #** _____ **OP (s) #** _____

P.O. QTY _____ **QTY RETURNED** _____

Are the parts clean?	☐ Yes	☐ No	
Are the parts free of burrs & sharp edges (as required)?	☐ Yes	☐ No	☐ N/A
Are the parts free of nicks, dings, handling damage?	☐ Yes	☐ No	
Are the parts packaged in adequate boxes?	☐ Yes	☐ No	
Do the parts meet all operation sheet requirements?	☐ Yes	☐ No	
Are inspection results attached?	☐ Yes	☐ No	
Are any non-conforming parts tagged (AG#, OP #, non-conformance)?	☐ Yes	☐ No	☐ N/A
Are all non-conforming parts segregated from remainder of parts?	☐ Yes	☐ No	☐ N/A
Has the Root Cause /Corrective Action been completed?	☐ Yes	☐ No	☐ N/A

For any non-conforming parts, please complete the following:

Op Number _____ Quantity non-conforming _____

Requirement	Actual
Root Cause What happened, how and why did it happen?	**Corrective Action** What did you do or what will you do to prevent this from recurring? Include timing of when was this action taken or when will it be taken. Provide objective evidence of correction, as appropriate

Comments

Submitted by _____ Date _____

Please complete the above information and return form with parts.   **THANK YOU!**

F-307-04-02-05 REV A