



**KLUNE INDUSTRIES,  
INCORPORATED**  
SPANISH FORK DIVISION

**DISTRIBUTOR**

DISTRIBUTOR NAME \_\_\_\_\_ DATE \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

The attached questionnaire is to be completed and forwarded together with any additional information to:

**KLUNE INDUSTRIES INCORPORATED  
ATTN: PROCUREMENT QUALITY  
1800 NORTH 300 WEST  
SPANISH FORK, UTAH 84660**

The questionnaire is based on Military, NASA, and Klune Quality System requirements. Approval status shall be based upon an analysis of the completed questionnaire and, in some cases, an on site survey.

Quality system questions, if any, may be discussed by the supplier and Klune Industries Inc. (KII) after the returned questionnaire is reviewed by KII Quality Assurance.

Prior to any contemplated on site survey, a mutually convenient schedule for the survey will be established.

Your cooperation and assistance will be greatly appreciated.

**IF YOU ARE NADCAP / AS9100 / ISO9001 APPROVED, PLEASE CHECK  
THIS BOX AND SUBMIT THIS PAGE *WITH A COPY OF YOUR  
CERTIFICATE.* DO NOT COMPLETE THE BALANCE OF THE SURVEY.**

**FOR KLUNE INDUSTRIES INCORPORATED USE ONLY**

REVIEW OF PRODUCT ALERTS - RESULTS: \_\_\_\_\_

AUDIT APPROVAL BY: \_\_\_\_\_

APPROVAL PERIODS - FROM \_\_\_\_\_ TO \_\_\_\_\_ VENDOR CODE \_\_\_\_\_

REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## DISTRIBUTOR QUALITY SYSTEM QUESTIONNAIRE

*\*All items marked as NO or NA (Not Applicable ) must be briefly justified in that all items within this survey are pertinent in determining supplier approval status. (Use an attached sheet if needed).\**

### **SECTION B**

1.0	PROCUREMENT CONTROLS	YES	NO*	N/A*
	a. Do you maintain an Approved and/or Qualified Manufacturer's List?	_____	_____	_____
	b. Are all MIL parts procured from a QPL Source?	_____	_____	_____
	c. Do you have available and do you use such a QPL?	_____	_____	_____
	d. Does your Purchased Order to the manufacturer define and stipulate applicable MIL Specifications and related requirements?	_____	_____	_____
2.0	MANUFACTURER CONTROLS	YES	NO*	N/A*
	a. If required by Purchase Order will you require your Manufacturer's to submit inspection/test data of material purchased?	_____	_____	_____
	b. Do you require and maintain on file, all certifications of material if required by Purchase Order?	_____	_____	_____
	c. Do you have an implemented system for determining the adequacy and qualification of your manufacturers?	_____	_____	_____
	d. Do you have an effective Corrective Action System?	_____	_____	_____
	e. Do you take corrective action on buyer reported deficiencies whether in your organization or suppliers?	_____	_____	_____
3.0	RECEIVING CONTROL	YES	NO*	N/A*
	a. Do you maintain a Receiving Inspection activity?	_____	_____	_____
	b. Do you perform inspections of materials received from Manufacturer's	_____	_____	_____
	c. Do you maintain records of these functions?	_____	_____	_____
	d. Is the received material identified and traceable back to the Manufacturer's inspection/test data required by Purchase Order?	_____	_____	_____
	e. Can you provide your customers with inspection/test data and documentation upon request?	_____	_____	_____
	f. Is defective material identified and segregated?	_____	_____	_____
4.0	STOCK ROOM CONTROL	YES	NO*	N/A*
	a. Do you practice and implement the concept of "first in - first out" principle of stock control for perishable materials/chemicals?	_____	_____	_____
	b. Can the quality status of material be identified ?	_____	_____	_____
	c. Have you provided for, and maintained adequate control of all material in your stock room?	_____	_____	_____

