



# Special Tooling Survey

Dear Supplier:

You have received this survey because you currently hold or have requested to have special tooling at your location to support NORDAM purchase requirements for manufacture or repair of aircraft parts. The information you provide on this survey will be evaluated to determine compliance with flow-down of NORDAM customer requirements as a NORDAM approved supplier. This survey may be used by ALL NORDAM divisions.

**Special Tooling (ST):** Jigs, dies, fixtures, molds, patterns, other equipment and manufacturing aids, all components of these items, and replacement of these items, which are of such a specialized nature that without substantial modification or alteration their use is limited to the development or production of particular services or parts thereof or to the performance of particular services. It does not include material, special test equipment, facilities (except foundations and similar improvements necessary for installing special tooling), general or special machine tools, or similar capital items.

**Media of Inspection (MOI):** ST designated for use in verifying that features or characteristics of parts or assemblies are in compliance with engineering definition requirements

**Table 1 ST Category Description and Inspection Requirement Summary**

ST Category	Description	Periodic Inspection Requirement
Category I	Program master tools, which typically include reference tools and tooling data that establish or control production tools.	Visual at each use, no special records required or as identified in ST definition.
Category II	Production end-item feature controlling tools or check fixtures including interchangeable/ replaceable interface or production interface features where no other means of inspection are performed. This category contains MOI tools.	See MOI types.
MOI Type 1	Major end-item tools where tool degradation to the initial build can only be determined via physical measurement or master tool coordination and visual inspection (typically recycle, routine, or periodic inspections).	Physical measurement or coordination to a master tool (Category I), recorded on a prescribed inspection plan at a periodic interval.
MOI Type 2	Basic end-item tools where tool degradation to the initial build can be verified via visual inspection.	Visual inspection, recorded on a prescribed inspection plan at a periodic interval.
Category III	ST not covered by Categories I and II.	Visual at each use, separate records not required (manufacturing work instructions establish the record).

Survey Type	<input type="checkbox"/> Self-Survey	<input type="checkbox"/> On-Site Audit performed on	/	/
Company Name				
Site Address				
City				
State/Province/Territory				
Postal Code				
Country				
Main Phone Number				
Main Fax Number				
Contact Name				
Contact Phone Number				
Contact Email				

	<b>Quality Management System</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
1	Do you have a documented process used for special tooling receiving, acceptance, storage, control, use, maintenance, and shipping?			
2	Do you have documented process for the following special tooling capabilities:			
	a. Definition / Design?			
	b. Fabrication, Rework and Modification?			
	c. Acceptance?			
	d. Maintenance?			
	<b>Personnel</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
3	Any changes in Quality Management in the past 12 months?			
4	Any changes in Tooling personnel in the past 12 months?			
5	Any changes in Computer Measurement System (CMS) / Portable Computer Measurement System (PCMS) personnel in past 12 months?			
	<b>Records</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
6	Do you have documented process for records retention to of initial, rework, maintenance, and period tool inspection history of special tools?			
7	Do the retained records for fabrication, rework, modification, validation, acceptance, or periodic tool inspection reference the following:			
	a. Identification?			
	b. Definition?			
	c. Feature, dimension, and process inspection results?			
	d. Fabrication, rework, and modification/configuration history, which must include relevant authority documentation?			
	e. Inspection/release status?			
	f. Validation prior to acceptance when applicable?			
	<b>Periodic Tool Inspection (PTI) Results</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
8	Do you maintain the results of preceding and current Period Tool Inspections (PTI) of special tools and include the following:			
	a. Dimensions/features verified during the period inspection, including actual values or coordination to Category I special tool?			
	b. The date of the periodic check?			
	c. The inspection authority of the individual who performed the periodic check?			

<b>Periodic Tool Inspection (PTI) Results</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
8	d. The date of the next scheduled period check (expiration date)?			
	e. Special tool instructions/definition used for period tool inspection requirement?			
	f. Verification of special tool configuration level?			
	g. Objective evidence of the acceptance status of the special tool is identified?			
<b>Management Responsibilities</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
9	Do you have a documented process to ensure special tooling is at the designated configuration level or revision for the part or assembly being produced?			
10	Do you ensure special tooling used as media of inspection is identified and periodic tool inspections are performed?			
11	Do you have a process to notify NORDAM when media of inspection special tooling is found to be beyond engineering tolerances?			
<b>Product Realization</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
12	Do you have a documented procedure to perform Each Use Condition Check of Special Tools prior to use and include the following:			
	a. Special Tool is properly identified and identification is legible?			
	b. An acceptance stamp is on the identification tag or near the special tool identification?			
	c. The instruction, direction, and caution/safety tags are securely attached and legible when applicable?			
	d. All special tool details/parts are available and in good condition?			
13	Do you have a procedure to create, revise, and/or release special tool usage instructions, when usage cannot be easily communicated on the tool or within manufacturing work instructions based on complexity?			
14	Do you have a process to validate special tooling has been accepted and released for use prior to first article inspections, including subcontractors?			
15	Do you have a process for training and acceptance of measurements when Computer Measurement Systems (CMS) and equipment are used for special tooling acceptance which includes the following:			
	a. Create acceptance criteria used by operation and quality assurance?			
	b. Develop and use scale factors to compensate measurement of coefficient of thermal expansion and to verify accuracy?			
	c. Establish, transform, and manipulate coordinate systems?			
	d. Establish data collection parameters and requirements?			
	e. Establish special targeting and target adapter requirements			
	f. Equipment handling, equipment setup, multi-station setup, field checks, and calibrations?			
	g. Data analysis, format, storage, and reporting?			
<b>Sub-Tier Control</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
16	Do you have a process and evidence supporting the approval and control of subcontractors who perform special tooling processes and include the following when applicable:			
	a. Definition/ Design?			
	b. Fabrication/ Rework / Modification?			

<b>Sub-Tier Control</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
16	c. Measurement / Acceptance?			
	d. Maintenance?			
	e. User – Each use condition check?			
17	Do you have a process to validate special tooling processes, including periodic tool inspection at subcontractors?			
18	Do you flow down the special tool requirements to all subcontractors performing special tooling processes based on program contract requirements?			
<b>Tooling Process</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
19	Do you incorporate, at the noted effectivity, changes to special tooling when engineering definition changes occur?			
20	Do your procedures require the creation of internal work authorization to perform fabrication, rework, and modification of special tools?			
21	Do you have procedures to perform special tool validation on initial, rework, or modified special tools?			
22	Do your procedures require special tooling identification requirements?			
23	Do your procedures require visual evidence of special tool acceptance?			
<b>Periodic Tool Inspection</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
24	Do you have a procedure to ensure the stability of major assembly special tooling is accomplished prior to establishing or adjusting the frequency of period tool inspection (PTI)?			
25	Do you have a procedure to ensure periodic inspection of all special tooling used for product acceptance?			
26	Do you require visual identification of period tool inspection acceptance indicating expiration date and acceptance status on special tooling as required by contract?			
27	Do you have a procedure to investigate and provide notification to NORDAM when a special tool exceeds engineering tolerances and has potential product impact?			
<b>Tooling Handling and Storage</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
28	Do you periodically conduct a physical inventory of special tooling and maintain records?			
29	Do you have a procedure to ensure appropriate handling, preservation, and maintenance requirements are used to prevent damage or deterioration of all special tools?			
30	Do you have a procedure for the status, handling, storage, release from storage, and accountability of all special tools?			
31	Do you ensure that no Category I special tool (master tool) is used for direct manufacture or acceptance of product?			
<b>Tooling Shipping /Receiving</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
32	Do you have a procedure for receipt of special tooling to ensure verification of the following :			
	a. No damage or missing details?			
	b. Serviceable condition?			

	c. Configuration?			
	d. Data elements (Identification, definition, usage/inspection instructions)?			
	e. Inspection / Release status?			
	<b>Tooling Shipping /Receiving</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
33	Do your procedures for receiving inspection define the incorporation of customer special tools and special tool data elements into tool control process?			
34	Do your procedures include control and shipment of special tooling to subcontractors and include customer notification?			
35	Do you coordinate with the customer, account for all details and ensure special tooling is in serviceable condition in preparation of shipping?			
36	Do your procedures for shipping require coordination with the customer when required to ship nonconforming special tools an obtain disposition or approval to ship with open nonconformance?			

***It is the vendor's responsibility to abide by the requirements of the accepted NORDAM contract, purchase order and NORDAM Supplier Quality Manual while performing work for NORDAM.***

***I understand and will comply with the requirements of the NORDAM Supplier Quality Manual while performing maintenance or manufacture work for NORDAM.***

***I have accessed the NORDAM Supplier Quality Manual located within NORDAM Supplier Documents section of the following webpage: [http://www.nordam.com/myNORDAM/public\\_documents.aspx](http://www.nordam.com/myNORDAM/public_documents.aspx)***

*(scroll down on the NORDAM webpage if NORDAM Supplier Documents section is not visible on your computer)*

<b>(VOID UNLESS SIGNED)</b>	
Name	Title
Signature	Date

***For questions or submittal of signed survey; contact:***

***Contact Name:***

***NORDAM***

***Division:***

***Address***

***Phone:***

***Fax:***

***Email:***

***NORDAM website:*** [www.nordam.com](http://www.nordam.com)

NORDAM Use:					
Tracker #		SAP #		Legacy #	

**FOR NORDAM INTERNAL USE ONLY.**

*(After completing document, scan, re-name and save document to "\\tng\nmd\_depts\SHARED\CORP QUALITY VMM")*

Tracker:		Vendor:	
Legacy:		Vendor Code:	

 Approved Tooling      Effective Dates \_\_\_\_\_ to \_\_\_\_\_  
 Denied Tooling approval

Describe the Scope of Approval:


\_\_\_\_\_ Name \_\_\_\_\_ Title / Division

\_\_\_\_\_ Signature \_\_\_\_\_ Date