



Jamco America, Inc

Supplier Survey

**SECTION I: TO BE COMPLETED BY JAMCO**

Initiated By: \_\_\_\_\_

Submission Type:  Initial Survey  Resurvey

Supplier Code: \_\_\_\_\_

Supplier Name: \_\_\_\_\_

Key Supplier:  YES  NO

Make Parts to JA Dwgs:  YES  NO

JQCK-006 Applicable:  YES  NO

Specifications working too: \_\_\_\_\_

Supplier Type:

- A: Customer Mandated
- D: Distributor
- C: OEM or Customer
- M: Manufacturer
- P: Processor (NADCAP)
- SP: Service Provider (Calibration)

Capability: Example, Special Processing, does supplier comply to a specific requirement?

Capacity: Example, Lead Time is acceptable?  YES  NO  N/A

If NO: Reason: \_\_\_\_\_

**SECTION II: TO BE COMPLETED BY SUPPLIER**

Save the file and return it by e-mail within ten working days.

Please include a copy of your certification (AS9100/ISO9001)

NOTE:

Multi-site approvals require each applicable location to be listed. Distributors, please provide warehouse locations from where parts are being shipped.

**Shipping Address:**

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Bill To Address:**

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Country: \_\_\_\_\_

**Company Organization**

General Mgr. \_\_\_\_\_

Quality Mgr. \_\_\_\_\_

Sales Mgr. \_\_\_\_\_

Customer Service Mgr. \_\_\_\_\_

**Phone or Email:**

Contact \_\_\_\_\_

Contact \_\_\_\_\_

Contact \_\_\_\_\_

Contact \_\_\_\_\_

**Primary Type of Business**

Manufacturing  Testing  Machining

Design  Calibration  Painting

Metal  Raw Materials  Other

Special Processes  Original Equipment MFG  \_\_\_\_\_

Repair Station  Electronic  \_\_\_\_\_

Distribution  Assembly  \_\_\_\_\_



**Other Services:**

**Facility / Staff Employees**

Total Employees \_\_\_\_\_

How many shifts \_\_\_\_\_

Quality Department  YES  NO

Inspection Team  YES  NO

**Quality System:**

AS9100  YES  NO

ISO9001  YES  NO

NADCAP  YES  NO

OTHER  YES \_\_\_\_\_

**NOTE:**

Please attach copy of the certifications. Section IV Quality Questionnaire not required to fill out if certified to a Quality System.

**Please Acknowledge:**

- Review of Jamco's purchase order terms and conditions  YES  NO  
<https://www.jamco-america.com/wp-content/uploads/2024/07/JQSGU-004.pdf>
- Your organization can provide Certificate of Conformance  YES  NO
- Your organization can comply with RoHS (Europe)  YES  NO
- Your organization can comply with Victims of Trafficking & Violence policy  YES  NO
- Your organization can comply with Conflict Mineral policy  YES  NO
- Take action to prevent counterfeit and EEE parts from entering the supply chain  YES  NO
- Take action to prevent FOD and defects from entering the supply chain  YES  NO

I certify the information provided is true and complete

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

**SECTION III: TO BE COMPLETED BY JAMCO**

Approval Type:  Full  Limited (one time buy)

Comments: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_