



Chelton Avionics Inc. dba Canyon AeroConnect  
 6400 Wilkinson Dr. Prescott, AZ 86301  
 www.canyonaeroconnect.com

New  Recurrent  Undue Burden Y or N

Approve  Disapprove  Supplier ID: \_\_\_\_\_

Canyon Quality/Date: \_\_\_\_\_

Canyon Purchasing/Date: \_\_\_\_\_

Canyon Engineering/Date: \_\_\_\_\_

Canyon Accounting/Date: \_\_\_\_\_

*NOTE: If supplier has a pre-completed standard survey that covers the questions asked herein, the supplier may submit that survey for review. However, the supplier must still provide requested Company Certifications/Documents and sign and return Page 6. Failure to do so may result in survey rejection or delay in processing.*

Third Party Screening: Approved \_\_\_ Denied \_\_\_

**GENERAL INFORMATION**

COMPANY NAME: \_\_\_\_\_

STREET & MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

REMITTANCE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

W-9 included Yes  No  EFT information included Yes  No  INVOICE TERMS \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

PRIMARY MANUFACTURER TOTAL EMPLOYEES: \_\_\_\_\_ QUALITY: \_\_\_\_\_

OTHER (REPAIR STATION) ENGINEERING: \_\_\_\_\_ ADMIN: \_\_\_\_\_ PRODUCTION: \_\_\_\_\_

DISTRIBUTOR INCORPORATED  YES  NO

SERVICE PROVIDER

PRODUCTS MANUFACTURED: \_\_\_\_\_

PRODUCTS REPAIRED: \_\_\_\_\_

PRODUCTS DISTRIBUTED: \_\_\_\_\_

SERVICES PROVIDED: \_\_\_\_\_

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**KEY MANAGEMENT (include head of Quality, Sales and Finance Contacts)**

NAME	TITLE	TELEPHONE/EXT	EMAIL

**Company Certifications/Documents**

ISO9001 Yes  No  AS9100 Yes  No  Other:          Military:

Anti-Drug and Alcohol Prevention Program Yes  No  ITAR Registered Yes  No

FAA Part 145 Certified Yes  No  EASA Part 145 Certified Yes  No

Duty Time Limitations Yes  No

**Supplier must submit copies of the following in order to complete the supplier evaluation process:**

- Quality Manual: included Yes  No
- 3<sup>Rd</sup> Party Certifications (if issued): included Yes  No
- ITAR Registration Letter (if issued): included Yes  No
- FAA Certifications (if issued): included Yes  No
- Any other documentation the supplier would like to be considered when making the approval decision

A LISTING OF AEROSPACE COMPANIES THAT HAVE APPROVED THE QUALITY SYSTEM	A LISTING OF AEROSPACE COMPANIES THAT YOU CURRENTLY DO BUSINESS WITH:

Will you allow right of access to regulatory agencies at your facility?	Yes	No	If No, explain
Will you allow right of access to CAC representatives as well as CAC customers as required?	Yes	No	If No, explain
If your company is located outside of the United States or its territories, does your country have a Bilateral Airworthiness	Yes	No	NA Explain the relationship

or Aviation Safety Agreement between its CAA and the USA FAA? What is your relationship with your countries CAA?			
Is your company dependent upon the use of co-producers of parts suppliers in countries that do not have bilateral agreements with the FAA (catalog parts excluded)	Yes	No	If Yes, provide details

**NOTE:** For suppliers who are located outside of the United States, Canyon will be required to notify the FAA prior to approval, to seek a decision paper in accordance with FAA Order 8100.11.

**Supplier: Name and Title of Person who filled out this Questionnaire (Please print):**

Name:	Title:
Authorized Signature:	Date:

**Canyon AeroConnect: Reviewer name and title (Please print):**

Reviewer Name:	Title:
Reviewer Signature:	Date:

**\*If this form is electronically filled out we still need a signature on file. Please Fax a signed copy of this page to Canyon AeroConnect Quality Assurance @ 928-708-1546**

## Quality Management System Document Change Request

<b>Is this a new document?</b>	<b>Yes</b>	<b>No x</b>	<b>QMSDCR #:</b> 0025
Document Number:	150-440628		
Document Title:	Supplier Questionnaire		
Other documents that require updating (affected by change):	N/A		

**Reason for new document or revision to existing:**

Update to new Canyon Logo. Add Undue Burden question on Page 1. Add 3<sup>rd</sup> Party Screening determination on Page 1.

**Details of change (Or attached redlined copy):**

Changed format. Added "Undue Burden Y or N" to top of questionnaire. Added "3<sup>rd</sup> Part Screening: Approved \_\_\_ Denied \_\_\_" under Canyon signature section. Removed headings to make sections fit on certain pages due to size of header.

<b>Document Owner or Designee:</b>	Alva Bricker	<b>Date Submitted:</b>	12/08/21
<b>Document Approver:</b>	Chris Dowdy	<b>Date Needed:</b>	12/08/21
<b>Document Published By:</b>	Chris Dowdy	<b>Date Published:</b>	12/08/21

### Document Change Checklist

Impact Assessed?	X Yes	No
Requires FAA MIDO Approval?	Yes	X No
Requires FAA FSDO Review?	Yes	X No
Requires Supplier Notification?	Yes	X No
Requires R&O Accountable Manager Sign Off? <small>(If updating 651-042924 Appendix to RSQCM)</small>	Yes	X No
Peer Review Completed?	X Yes	No

### Signatures

Document Owner:  Date: 12-10-21

*\*\*Document Owner: You are responsible for training affected personnel within 7 Days of signing this document.*

Approval:  Date: 12/9/21

Published:  Date: 12/9/21

R&O Accountable Manager: \_\_\_\_\_ Date: \_\_\_\_\_

*\*\*Repair and Overhaul Accountable Manager: Update revision of document being changed on 651-042924 - Appendix to the Repair Station Quality Control Manual, if applicable.*