

Supplier Failure Analysis Report

Instructions

This form shall be completed for any returned unit(s) when required by the Nonconformance Report.

- Text fields are designated with a symbol specifying if the information is required, conditional required, or optional.
 - **(R) – Required:** This is mandatory information.
 - **(CR) – Conditional Required:** The field shall be completed when applicable to the product (i.e. serial number shall be entered when the product has an associated serial number) or required by AeroVironment Supplier Quality.
 - **(O) – Optional:** This field is provided for convenience. The field may be left blank or populated with “N/A”.
- All text fields shall be completed electronically or in legible permanent ink.
- All fields shall be completed in English, or a language specified by AeroVironment.
- **NC/PR/SCAR Number(s):** This field is required and shall reference the AeroVironment document requesting this form. (i.e. NC 12345, UASPR-12345, or UASCAPA-12345).
- **Initial review/ Failure Verification/ Physical Condition:** Complete this section prior to rework. Record all visual observations and incoming verification test results (if applicable).
 - When using x-ray, SEMs, spectroscopy, material testing, or other first article equipment, specify the equipment used. Subsequent test data must accompany the completed report.
- **Work Performed:** Record the rework process step-by-step.
- **Test Results (after rework):** Record rework verification here.
- **Supplier’s Corrective Action Report:** This section must be completed if the failure was confirmed as the Supplier’s responsibility. Complete in accordance with SQM-001 Corrective Action criteria.
- This completed report and all objective evidence shall be submitted to SupplierQuality@avinc.com and your Purchasing Representative.

Supplier Failure Analysis Report

1 General Information

Incident Date: _____

(R) Supplier Name: _____

(R) RMA Number(s): _____

(R) NC/PR/SCAR Number(s): _____

(R) Part Number: _____ (R) Revision: _____ (R) Qty: _____

(CR) Serial Number(s): _____ (R) Date Received: _____

2 Analysis

(R) Initial Review // Failure Verification // Physical Condition

Provide the initial review of the part's condition via visual inspection. Utilize other methods as needed.

(CR) Work Performed

(CR) Test Results (after rework)

(CR) Were additional observations captured during analysis?

If yes, explain below.

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3 (CR) Supplier's Corrective Action Report (complete this section when failure is the supplier's responsibility)

CAR Number:

Containment:

Root Cause:

Corrective Action:

Preventative Action:
