# **B.1 Form 1 - Part Number Accountability**

Part namber as shown on the PO and drawing - include dash number and the suffix as applicable  5. Part Revision Level:  6. Drawing Number:  7. Drawing Revision Level:  8. Additional Changes:  Enter the part revision (this can be different than the drawing revision in some cases)  9. Manufacturing Process Reference:  10. Organization Name:  11. Supplier Code:  Enter the Supplier # from your GDLS PO, and add your CAGE Code if applicable  14. Full FAI:  Partial FAI:  Partial FAI:  Check if a full or partial FAI.  For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)  Assembly FAI:  Reason for Full/Partial FAI:  Reason for Full/Partial FAI:  Reason for Full/Partial FAI:  Change on PIN XXXXXX). If source inspection is required, please note that here	Please note: this is the	AS9102 Form 1, 2 & 3 entire snee	t count, not just For	m 1 Sneet: FILL	IN Of FILLIN
and drawing - include dash number and the suffix as applicable  5. Part Revision Level:  6. Drawing Number:  7. Drawing Revision Level:  8. Additional Changes:  List any GDLS-approved deviations (NCH), OD sheets, etc.  9. Manufacturing Process Reference:  10. Organization Name:  11. Supplier Code:  Enter the Supplier # from your GDLS PO, and add your CAGE Code if applicable  13. Detail Part FAI:  14. Full FAI:  Partial FAI:  For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)  Assembly FAI:  Reason for Full/Partial FAI:  Reason for Full/Partial FAI:  List a detailed reason for the FAI or partial FAI (examples: revision x to revision x changes, process changed for XXXXXX, supplier change on P/N XXXXXX). If source inspection is required, please note that here	1. Part Number:	2. Part Name:	3. Serial Number.	•	4. FAIR Identifier:
Enter the part revision (this can be different than the drawing revision in some cases)  9. Manufacturing Process Reference:  10. Organization Name:  11. Supplier Code:  12. Purchase Order No.:  Enter the Supplier # from your GDLS PO, and add your CAGE Code if applicable  14. Full FAI: Partial FAI: Check if a full or partial FAI. For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)  Check the appropriate box above or below for detail or assembly selection  Assembly FAI: Reason for Full/Partial FAI:  Reason for Full/Partial FAI:  Enter the drawing revision deviations (NCH), OD sheets, etc.  11. Supplier Code:  12. Purchase Order No.:  Enter the Supplier # from your GDLS PO, and add your CAGE Code if applicable  PO# and PO Revision  For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)  If the inspection is for a partial/delta FAI, to the baseline part number and the last approved revision. Please also include the GDLS sequence number for the last approved here  Assembly FAI: Reason for Full/Partial FAI:  List a detailed reason for the FAI or partial FAI (examples: revision X to revision X changes, process changed for XXXXX, supplier change on P/N XXXXXX). If source inspection is required, please		dash number    Part name as shown on the PO and Provide the S/N if applicable. If   I not applicable, note N/A			
different than the drawing revision in some cases)  Enter the drawing number  Enter the drawing revision  Enter the drawing revision  deviations (NCH), OD sheets, etc.  10. Organization Name:  11. Supplier Code:  Enter the Supplier # from your  GDLS PO, and add your CAGE  Code if applicable  14. Full FAI:  Partial FAI:  Check if a full or partial FAI.  For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)  Check the appropriate box above or below for detail or assembly selection  Baseline Part Number (including revision level):  Baseline Part Number (including revision level):  Assembly FAI:  Reason for Full/Partial FAI:  List a detailed reason for the FAI or partial FAI (examples: revision X to revision X changes, process changed for XXXXX, supplier change on P/N XXXXXX). If source inspection is required, please note that here	5. Part Revision Level:	6. Drawing Number:	7. Drawing Revisi	ion Level:	8. Additional Changes:
Enter the Supplier # from your   GDLS PO, and add your CAGE   PO# and PO Revision   Code if applicable	different than the drawing revision	be Lone Enter the drawing number Enter the drawing revision contact the drawing number the drawing revision contact the drawing revision to the drawin			deviations (NCH), OD
Job/WO/Router # Company Name Here GDLS PO, and add your CAGE Code if applicable  14. Full FAI: Partial FAI: Check if a full or partial FAI. For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)  Check the appropriate box above or below for detail or assembly selection  Baseline Part Number (including revision level): approved revision. Please also include th GDLS sequence number for the last approved for the last approved for the fall or partial FAI (examples: revision X to revision X changes, process changed for XXXXX, supplier change on P/N XXXXX). If source inspection is required, please note that here	9. Manufacturing Process Reference:	10. Organization Name:	11. Supplier Code	e:	12. Purchase Order No.:
13. Detail Part FAI:    For source inspection, please check full FAI and note 'source inspection' in the reason for full/partial FAI section (below)    Check the appropriate box above or below for detail or assembly selection	Job/WO/Router#	Company Name Here	Enter the Supplier # from your GDLS PO, and add your CAGE		
Check the appropriate box above or below for detail or assembly selection  Baseline Part Number (including revision level):  Check the appropriate box above or below for detail or assembly selection  Baseline Part Number (including revision level):  CDLS sequence number for the last approved here  List a detailed reason for the FAI or partial FAI (examples: revision X to revision X changes, process changed for XXXXXX, supplier change on P/N XXXXXX). If source inspection is required, please note that here	13. Detail Part FAI:	For source inspection, please check full FAI and note 'source inspection' in the reason for			
Assembly FAI:  Reason for Full/Partial FAI:  X to revision X changes, process changed for XXXXX, supplier change on P/N XXXXX). If source inspection is required, please note that here	below for detail or assembly	Baseline Part Number (including	revision level):	the baseline papproved revision	part number and the last on. Please also include the number for the last approval
a) If above part number is a detail part only, go to Field 19. Place N/A in fields 15 through 18 if there are no assembly parts or BOM parts	Assembly FAI: Change on P/N XXXXX). If source inspection is required, please				
listed (DETAIL PART)  b) If above part number is an assembly, go to the "INDEX" section below. See example below of an assembly  INDEX of part numbers or sub-assembly numbers required to make the assembly noted above.					

15. Part Number:	16. Part Name:	17. Part Type:	18. FAIR Identifier:
Part number from the parts list	Part name from the parts list	Enter detail, assembly, or cots	List the approved SEQ # if a previously qualified lot was used (and attach the applicable AS9102 form 1 showing the approval), or enter the information from field 4 above if qualifying at this level FAI If the part is cots, please list the packing slip/coc number here traceable to the material cert: example: cots #xxxxxx
REPEA	T THE ABOVE INSTRUCTIONS FOR	EACH PART ON THE BOM/PARTS LIS	T

### AS9102C

Check yes or no	- please r ion. Pleas	ocumented Nonconformance(s)? YES  NO  note a NCH/Deviation approval is still considered a non conformance. You must see also note, the approved deviation must also be referenced on your PO, and a partorning material		
20.FAIR Verified	Ву:	Name of the person who prepared/verified the FAI. Add stamp impression with the name here if delegated	21. Date:	Enter the date the FAIR was completed
22.FAIR Reviewed By:		ter who reviewed the FAI. Add stamp impression with the name here if legated (Cannot be the same person as field 20)		Enter the date the FAIR review was completed
24.Customer Арן	proval:	GDLS representative will sign and place their stamp impression here	25. Date:	GDLS REP will enter the approval date here
26. Comments:	space c	ist the PO quality clauses here, as well as any qualification letter dates (e.g., QX13 an also be used for notes pertaining to the review—part marking, finish being comvendors that ship to other GDLS suppliers for completion via PO instruction)		

### B.2 FORM 1: PART NUMBER ACCOUNTABILITY FORM INSTRUCTIONS \*GDLS EDITED VERSION\*

This form is used to identify the product that is having the First Article Inspection (FAI) conducted on (e.g., detail part, subassembly, assembly); referred to as "FAI part."

NOTE: Data fields 1 thru 4 are repeated on all forms for convenience and traceability. Any subsequent changes to "data fields" 1 thru 4 need to be made to all pages.

1	(R)	Part Number	Number of the FAI part [e.g., customer part number contained on the purchasing documents; part number from the associated Bill of Materials (BOM); manufacturer part number for internal parts, when customer part number is not available].
2	(R)	Part Name	Name of the FAI part.
3	(R)	Serial Number	Serial number of the FAI part; unique identifier assigned to a detail part, sub-assembly, or assembly by the organization or customer. <b>GDLS REQUIRES AN N/A IN THIS FEILD IF NOT APPLICABLE</b>
4	(R)	FAIR Identifier	Identifier for the First Article Inspection Report (FAIR). GDLS REQUIRES THE SEQ TYPE AND SEQ NUMBER HERE
5	(R)	Part Revision Level	The revision level of the FAI part being inspected. When the part is controlled by a part revision and the part has not been revised, indicate as such (e.g., N/C, No Change).  NOTE 1: The latest drawing or DPD revision (see field 7) does not always affect all parts contained on a drawing or DPD.  NOTE 2: This is the revision level that is identified on the part. Not all organizations use a part revision level for tracking configuration.
6	(R)	Drawing Number	Drawing and/or DPD number associated with the FAI part; drawing may be from customer, internal system, or design definition.
7	(R)	Drawing Revision Level	The revision level of the drawing or DPD associated with the FAI part. If the drawing has not been revised, indicate as such (e.g., N/C, No Change).  NOTE: This field identifies the revision levels of the drawings or DPD sets listed in field 6. When there is more than one entry in field 6, the entries in this field need to correspond to the entries presented in field 6.
8	(R)	Additional Changes	Provide reference numbers of any changes that are incorporated in the product, but not reflected in referenced drawing/part revision level (e.g., change in design, engineering changes, manufacturing changes, deviation or exclusion from certain drawing or DPD requirements). LIST ANY GDLS APPROVED DEVIATIONS(NCH), OD SHEETS ETC. GDLS REQUIRES AN N/A IN THIS FEILD IF NOT APPLICABLE
9	(R)	Manufacturing Process Reference	Reference number that provides traceability to the manufacturing record of the FAI part (e.g., router number, manufacturing plan number). Additional information such as lot number, batch number, date code, revision level, or line number may be included, as needed, to provide traceability to the specific manufacturing lot.
10	(R)	Organization Name	Name of the organization responsible for producing the design characteristics of the product and performing the FAI.
11	(R)	Supplier Code	A unique number given by customer to the organization; sometimes referred to as a Vendor Code, Vendor Identification Number, or Supplier Number. ENTER THE SUPPLIER # FROM YOUR GDLS PO AND ADD YOUR CAGE CODE IF APPLICABLE
12	(R)	Purchase Order No.	Customer purchase order number, if applicable. ALSO INCLUDE THE PO REVISION
13	(R)	Detail/Assembly	Type of FAI; check, as appropriate.
14	(R)	Full FAI/Partial FAI	Check the appropriate box (Full FAI or Partial FAI). For a partial FAI, provide the previous part number, including revision level. For partial FAIs based on similar parts (see 4.6), provide the approved configuration or FAI part number, including revision level. FOR SOURCE INSPECTION, PLEASE CHECK FULL FAI AND NOTE 'SOURCE INSPECTION' IN THE REASON FOR FULL/PARTIAL FAI SECTION (BELOW)  Baseline Part Number (including revision level): For a partial FAI, provide the previous FAI part number or approved configuration (including revision level). IN ADDITION GDLS REQUIRES THE GDLS SEQ # FOR THE LAST FAI / PARTIAL FAI APPROVAL LISTED HERE  Reason for Full/Partial FAI: Describe the reason [e.g., new part number; lapse in production; changes in design, process, or manufacturing location (see 4.6)] for the full or partial FAI.  Data Fields 15, 16, 17, and 18: This section is only required if the part number identified in field 1 is an assembly. All BOM parts (e.g., detail parts, sub-assemblies, COTS) that are part of the assembly, identified in field 1, shall be listed in this section. GDLS REQUIRES DETAILS SUCH AS: (Examples: REV X TO REV X CHANGES, PROCESS CHANGED FOR XXXXXX, SUPPLIER CHANGE ON P/N XXXXX)
15	(R)	Part Number	Part Number: Part number included in the assembly and items from the engineering and/or manufacturing BOM included in the drawing, DPD, or next level assembly. Typically, these are the part numbers, standard catalogue item numbers, deliverable or embedded software identification, or sub-assembly numbers required to complete the product noted in field 1.  NOTE 1: Include revision level for software listed on the BOM.  NOTE 2: Materials and processes listed on Form 2 do not need to be restated on Form 1.  GDLS REQUIRES N/A IN THIS FEILD IF THE TOP LEVEL IS NOT AN ASSEMBLY
16	(R)	Part Name	Name or description of the part number entered in field 15 that is installed in the assembly. GDLS REQUIRES N/A IN THIS FEILD IF THE TOP LEVEL IS NOT AN ASSEMBLY
17	(R)	Part Type	Enter whether the part is a detail part, sub-assembly, software, standard catalogue item, or COTS (or equivalent). GDLS REQUIRES N/A IN THIS FEILD IF THE TOP LEVEL IS NOT AN ASSEMBLY
18	(R)	FAIR Identifier	FAIR identifier (e.g., software generated FAIR identification or number, part number, individual organizational FAIR identification naming conventions) for the detail parts and associated assemblies. If no FAIR identifier is available, input the organization's identifier for the FAI or approved configuration.  LIST THE APPROVED SEQ # IF A PREVIOUSLY QUALIFIED LOT WAS USED (the supplier is required to attach the AS9102 Form 1 lower level approval if approved on a prior SEQ# and is the same LOT) OR ENTER THE INFORMATION FROM FEILD 4 ABOVE IF QUALIFYING AT THIS LEVEL FAI  IF THE PARTS IS COTS, PLEASE LIST THE PACKINGSLIP/COC NUMBER HERE TRACEABLE TO THE MATERIAL PROCURED: EXAMPLE:  COTS PACK/COC #XXXXXXX

GDLS REQUIRES N/A IN THIS FEILD IF THE TOP LEVEL IS NOT AN ASSEMBLY

When a nonconformance(s) has been documented in the FAIR, check "Yes" (see 4.5). Does FAIR Contain a Please note a NCH/DEVIATION Approval is still considered a NON CONFORMANCE. You must select YES if you have an approved 19 (R) Documented deviation. Please also note, the approved deviation must also be referenced on your PO, and a PARTIAL/DELTA FAI is required on the Nonconformance(s)? next shipment of conforming material. Legible identification of the person verifying the evaluation activities in 4.4 were completed. 20 (R) FAIR Verified by NOTE: Electronic Identification is acceptable. NAME OF THE PERSON WHO PREPARED/VERIFIED THE FAIR. ADD STAMP IMPRESSION WITH THE NAME HERE IF DELEGATED 21 (R) Date Date when field 20 was populated. Legible identification of the person from the organization who reviewed and approved the FAIR. Should not be the same individual identified in FAIR Reviewed / Approved 22 (R) field 20. NOTE: Electronic identification is acceptable. ADD STAMP IMPRESSION WITH THE NAME HERE IF DELEGATED 23 (R) Date Date when field 22 was populated. Used by customer to record approval. 24 (R) Customer Approval NOTE: Electronic identification is acceptable. **GDLS REP WILL SIGN AND STAMP HERE** Date when field 24 was populated. GDLS REP WILL ADD THE APPROVAL DATE HERE 25 (R) Date Provide any supporting comments (e.g., associated nonconformance information, identification of associated documentation). GDLS REQUIRES the PO quality clauses here, as well as any qualification letter dates (example QX118, QK19, Testing etc.) This space can also be used 26 (R) Comments for notes pertaining to the review- part marking, finish being completed by another vendor etc. (for vendors that ship to other GDLS **Suppliers for completion VIA PO instruction)** 

## B.3 FORM 2 - PRODUCT ACCOUNTABILITY - MATERIALS, SPECIAL PROCESSES, AND FUNCTIONAL TESTING

Please note: this is the AS9102 Form 1, 2 & 3 entire sheet count, not just Form 2 Sheet: FILL IN of FILL IN

1. Part Number:		2. Part Name:	•		3. Serial Number	<u> </u>	4. FAI Identifier:	
Part number as show and drawing - include number and the suffin applicable	dash	Part name as drawing	shown on the	PO and	O and Provide the S/N if applicable. If not applicable, note N/A		Sequence type and sequence # here	
5. Material or Process Name	1	cification ımber	7. Code	,	8. Supplier	9. Customer Approval Verification	10. Certificate of Conformance Number	
Enter the material or process here. These items are typically located in the drawing notes—they can sometimes be found specifications within the drawing notes or OD sheets, etc.  If completing a FAIR with dash-number detail assemblies on the same drawing (continuous drawing FAIR), you must list the FN the material is use on if multiple material requirements are present on the drawing See the FAI guide for a example	g in List the sp for the ma processes ASTM/MIL If the spec not identi the drawin here ed al	List the specification for the material or processes here (e.g., ASTM/MIL-STD, etc.). code i availa If the specification is not identified, place the drawing number here		The name of the supplier you procured from goes here. If they are a distributor, you can list the supplier who provided the material to you with a / (slash) and then also note the MFR/OEM of the actual material.  *The address may be omitted if the address of the supplier is present on the COC*		e.g., weld letters, software approval letters, A514 approval letters would be listed here if applicable  If no customer approval verification is needed, place N/A here.	List the COC/pack slip traceable to the item your company procured here, as well as any heat/lot/date code or expiration information	
	Repea	t the above ins	structions for e	ach pa	rt on the BOM/par	ts list/drawing notes		
	·			Γ	·	<u> </u>		
11. Funct	tional Test Pro	cedure Numb	<u> </u> er		12.	 Acceptance Report I	l Number	
List the test proce internal or GDLS as a required and you d	edure here if t applicable). If o not test the	esting is requi	red (either contractually y, place N/A	no testing is performed			passing data, or place N/A if	

# B.4 FORM 2 - PRODUCT ACCOUNTABILITY - MATERIALS, SPECIAL PROCESSES, AND FUNCTIONAL TESTING FORM INSTRUCTIONS \*GDLS EDITED VERSION\*

This form is used if any materials, special processes, or functional testing are defined as a design characteristic.

NOTE: Data fields 1 thru 4 are repeated on all forms for convenience and traceability. Any subsequent changes to "data fields" 1 thru 4 need to be made to all pages.

1	(R)	Part Number	Number of the FAI part [e.g., customer part number contained on the purchasing documents; part number from the associated Bill of Materials (BOM); manufacturer part number for internal parts, when customer part number is not available].
2	(R)	Part Name	Name of the FAI part.
3	(R)	Serial Number	Serial number of the FAI part; unique identifier assigned to a detail part, sub-assembly, or assembly by the organization or customer. <b>IF THE PART ISNT SERIALIZED PLACE N/A</b>
4	(R)	FAIR Identifier	Identifier or identification number for the First Article Inspection Report (FAIR). GDLS REQUIRES THE SEQ TYPE AND SEQ NUMBER HERE
5	(R)	Material or Process name	Name of materials (e.g., raw materials, paint, primer adhesives, weld filler) or special processes. THIS INCLUDES ALL DRAWING NOTE MATERIALS AND PROCESSES. PART MARKING, HEAT TREATMENNTS ETC. IF COMPLETING A FAIR WITH DASH NUMBER / DETAIL ASSEMBLIES ON THE SAME DRAWING (CONTINUOUS DRAWING FAIR) YOU MUST LIST THE FN THE MATERIAL IS USED ON IF MULTIPLE MATERIAL REQUIREMENTS ARE PRESENT ON THE DRAWING) SEE FAI GUIDE FOR AN EXAMPLE.
6	(R)	Specification Number	Provide the following information:  • Material specifications and material form (e.g., sheet, bar) for all materials incorporated into the FAI part (e.g., weld, braze filler).  • Special process specifications; including class, if applicable, and permitted substitutions.  • If Commercial-Off-the-Shelf (COTS)/standard catalogue items are modified, then list the non-modified standard hardware or COTS item part number.  NOTE: Non-modified standard catalogue item(s), when part of an assembly, are listed on Form 1, "Part Number Accountability." IF THE SPECIFICATION IS NOT IDENTIFIED PLACE THE DRAWING NUMBER HERE
7	(R)	Code	Any code specified for the material or process. PLACE N/A IN THIS FIELD IF NOT REQUIRED
8	(R)	Supplier	Identify organization (internal or external) performing special process(es) or supplying material.  • Name.  • Address. THE ADDRESS MAY BE OMITED IF THE ADDRESS OF THE SUPPLIER IS PRESENT ON THE COC  • Code (when available).
9	(R)	Customer Approval Verification	Indicate if the special process(es) or material sources are approved by the customer. Enter "Yes" if approved; "No" if approval is required, but process source is not approved; or "NA" if customer approval is not required.  NOTE: A "No" would be handled in accordance with 4.5.

10	(R)	Certificate of Conformance number	The applicable certificate number (e.g., special process completion certification, raw material test report number, modified standard catalogue item compliance report number, traceability number). LIST THE COC/PACKSLIP TRACEABLE TO THE ITEM HERE, AS WELL AS ANY HEAT/LOT/DATE CODE INFORMATION. Include shelf life for applicable items.
11	(R)	Functional Test Procedure Number	Functional Test Procedure number identified as a design characteristic. ENTER N/A IF NOT APPLICABLE
12	(R)	Acceptance Report Number	The functional test certification indicating that test requirements have been met.  NOTE: When software is uploaded as part of a test procedure, record the software and revision level and acceptance report number. ENTER N/A IF NOT APPLICABLE
13	0	Comments	Provide supporting comments, as applicable.

### **B.5 FORM 3 - CHARACTERISTIC ACCOUNTABILITY, VERIFICATION, AND COMPATIBILITY EVALUATION**

Please note: this is the AS9102 Form 1, 2 & 3 entire sheet count, not just Form 3 Sheet: **FILL IN FILL IN** 4. FAIR Number 1. Part Number 2. Part Name 3. Serial Number Part number as shown on the PO and drawing - include dash number Provide the S/N if applicable. If not applicable, note Part name as shown on the PO and drawing Sequence type and sequence # here and the suffix as applicable **Characteristic Accountability Inspection / Test Results** 11. 6. Reference 7. Characteristic 10. Designed / 5. Char No.: Nonconformance 8. Requirement: 9. Results: 12. Additional Data / Comments: Location: Designator: **Qualified Tooling:** Number: List the tooling type (e.g., calipers), the number of the tool traceable to records List any approved Type out the requirement or take a deviation (NCH) (e.g., SY12-3A), and the screenshot and paste the date of calibration numbers here if The drawing page List any additional comments here. # Correlating requirement that is being Enter key and location of the expiration (e.g., EXP applicable to the If you are a split-process supplier, note N/A to the ballooi characteristic (KC) or inspected. Include full balloon/characteri requirement being List the inspection results 09/25/25) if calibrated. and detail why you are not completing this # on the critical item (CI). Place requirement details, including stic being inspected. If no requirement internally. Example: 'N/A - To be drawing/DPD 'Minor' if not defined tolerances as applicable. The use inspected deviation is completed by XXXXXX Calibration records are of ballooning software is applicable, place not required in the encouraged FAIR; however, FSRS N/A. will sample audit tool records when validating the FAI. Repeat the above for each item required to be reported on from the drawing

# B.6 FORM 3 - CHARACTERISTIC ACCOUNTABILITY, VERIFICATION, AND COMPATIBILITY EVALUATION FORM INSTRUCTIONS \*GDLS EDITED VERSION\*

This form is used to record inspection results for the design characteristics and to document any applicable nonconformances (see 4.5).

NOTE: Data fields 1 thru 4 are repeated on all forms for convenience and traceability. Any subsequent changes to "data fields" 1 thru 4 need to be made to all pages.

1	(R)	Part Number	Part Number: Number of the FAI part [e.g., customer part number contained on the purchasing documents; part number from the associated Bill of Materials (BOM); manufacturer part number for internal parts, when customer part number is not available].
2	(R)	Part Name	Name of the FAI part.
3	(R)	Serial Number	Serial number of the FAI part; unique identifier assigned to a detail part, sub-assembly, or assembly by the organization or customer. <b>GDLS REQUIRES AN N/A IN THIS FEILD IF NOT APPLICABLE</b>
4	(R)	FAIR Identifier	Identifier or identification number for the First Article Inspection Report (FAIR). GDLS REQUIRES THE SEQ TYPE AND # HERE
5	(R)	Char. No.	Unique assigned number for each design characteristic.  • The ballooned design characteristic shall clearly be traceable to the characteristic number listed in field 5.  • Automated inspection methods/tooling measurement report/results, shall all be clearly linked to the characteristic number in field 5, ballooned drawing, and associated measurement report/results.  NOTE: A single design callout that applies to multiple characteristics (see 3.16) may be recorded as one characteristic.
6	(R)	Reference Location	Location of the design characteristic [e.g., drawing zone (page number and section), Digital Product Definition (DPD) model location callout].
7	(R)	Characteristics Designator	As applicable, a unique identification for special requirements [e.g., Key Characteristic (KC), Critical Item (CI), items requiring additional design or process control] defined by customer (reference 9100 and 9103). <b>ENTER KEY CHARECTERISTIC (KC), OR CRITICAL ITEM (CI) PLACE MINOR IF NOT DEFINED</b>
8	(R)	Requirement	Specified requirement for the design characteristic (e.g., drawing or DPD dimensional characteristic with associated nominal dimension and tolerances, drawing notes, requirements).  • The organization shall record the requirements in the units (e.g., metric, imperial systems) specified on the drawing or DPD, unless otherwise approved by the customer (see 4.7.3.a).  • The organization shall record the software revision for embedded or deliverable software.

(R) Results

List measurement(s) obtained for the design characteristics.

The organization shall record the results in the units (e.g., metric, imperial systems) specified on the drawing, DPD, unless otherwise approved by the customer (see 4.7.3.a).

- For multiple characteristics list each characteristic as individual values or list once with the minimum and maximum of measured values attained. If a characteristic is found to be nonconforming, then that characteristic shall be listed separately with the measured value noted.
- When qualified tooling (e.g., radius gauges) is used as a go/no-go gauge (see4.7.3.b), record the results as an attribute (e.g., pass/fail)
- When automated inspection equipment produces measurement results, those results may be referenced on Form 3 identified as pass/fail and attached only when:
- The characteristic numbers are clearly linked in the attached report [e.g., characteristic identification on Coordinate Measurement System (CMS) report is the same as on this form].
  - The results in the attached reports are clearly traceable to the characteristic numbers.
  - The results are directly comparable to the design characteristic.
- A CMS report only depicting deviation from nominal in multiple axes is not acceptable; the report shall reflect an actual geometric value.
- If a design requirement requires verification testing, record the actual results on the form. If a laboratory report or certificate of test is included in the FAIR, the results may be recorded as an attribute (e.g., pass/fail) and the test reference number recorded on the form. The laboratory report or certificate of test shall show specific values for requirements and actual results.
- For characteristics with visual verification requirements that are rated against standard photographs/master samples/standards; list the unique identifier of the closest comparison. A statement of conformance is acceptable; record the reference number on the forms.
- For processes that require verification per design characteristics, include a statement of conformance (e.g., certification of conformance, verification indicator accept).
- For characteristics verified by attribute inspection, include statement of conformance (e.g., accept).

ed

Designed/Qualified Tooling

10 (R)

When design tooling or specially designed tooling, including Numerically Controlled (NC) programming as a media of inspection, is used for attribute acceptance of the characteristic; record the tool identification number. When qualified tooling is used for attribute acceptance, record the gauge value or range (e.g., minimum/maximum value), as applicable. LIST THE TOOLING TYPE (EX. CALIPERS) NAME/NUMBER OF THE TOOL TRACEABLE TO RECORDS (EX. SY12-3A) AND THE DATE OF CALIBRATION EXPIRATION (EX. EXP 09/25/25) IF CALIBRATED

\*CALIBRATION RECORDS ARE NOT REQUIRED IN THE FAIR; HOWEVER, FSRS WILL 'SAMPLE AUDIT' TOOL RECORDS WHEN VALIDATING THE FAI\*

11 (R) Nonconformance Number

If the characteristic is found to be nonconforming, record a nonconformance document reference number. PLACE N/A IF NO NONCONFORMANCES

This area is reserved for optional fields; add additional columns, as required, by the organization or customer. **LIST ANY ADDITIONAL COMMENTS HERE.** 

12 (O) Additional Data / comments

LIST ANY BONUS TOLERANCE NOTES IF FETURE CONTROL FRAMES ARE OVER THE FRAME REQUIREMENT LISTED ON THE DRAWING/DPD

IF YOU ARE A SPLIT PROCESS SUPPLIER, NOTE N/A AND DETAIL WHY YOU ARE NOT COMPLETING THIS REQUIREMENT INTERNALLY: EXAMPLE, "N/A- TO BE COMPLETED BY XXXXXX"

Date	Summary	Group/Who
2025-11-06	New Document Release	SQA- D. Totten
	1) Added note for sheet count clarification to all 3 forms.	
	2) Added 'INCLUDE DASH NUMBER AND THE SUFFIX AS APPLICABLE.' to Field 1, on all 3	
	forms.	
	3) Added 'IF THE SPECIFICATION IS NOT IDENTIFIED PLACE THE DRAWING NUMBER HERE'	
	to Form 2, Field 6	
	4) Added 'WELD LETTERS, SOFTWARE APPROVAL LETTERS, A514 APPROVAL LETTERS	
	WOULD BE LISTED HERE IF APPLICABLE' to Form 2, Field 9	
	5) Changed wording from N/A to 'PLACE MINOR IF NOT DEFINED' to Form 3, Field 7. Added	
2025-11-11	'(FORM 3 INSTRUCTIONS)' to Form 3, Field 9 for clarification.	SQA- D. Totten
	AS9102 form 1, fields 8 & 19: Removed reference to 'TRA' Filed 18 added a note for the	
	supplier to attach the AS9102 Form 1 lower level approval if approved on a prior SEQ# and	
2025-12-15	is the same LOT. Corrected typos, and updated formatting.	SQA- D. Totten