



FABRICATING

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Supplier Name: _____ Contact: _____

Please complete the self evaluation form and return promptly. This form is used to compile data for AS 9100 "C" risk management. Please truthfully score the following fields to the best of your ability and return to AMRO quality. Answers may be approximate.

Please rate the following' (Circle/ Highlight the one that applies):

CAPACITY	100 %	80 %	60 %	< 60 %
AVERAGE LEAD TIME	4 WEEKS	3 WEEKS	2 WEEKS	< 2 WEEKS
WEEKEND AVAILABLE(PER MONTH)	4 WEEKS	3 WEEKS	2 WEEKS	< 2 WEEKS
AVERAGE QUALITY RATING TOP THREE CUSTOMERS	➤ THAN 98%	95- 98 %	90-95 %	< 90 %
AVERAGE OTD TOP THREE CUSTOMERS	➤ THAN 98%	95- 98 %	90-95 %	< 90 %

AMRO SURVEY BY: _____

Please return this form to:

Daniel Shibley Sr. dshibley@amrofab.com
Quality Engineer/ Safety Director/ Lead AS 9100 "C" internal auditor
AMRO Fabricating Corporation
Fax (626) 579-2249

Thank you,

Daniel Shibley

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