

# B&G Precision, Inc.

## CUSTOMER SPECIFIC RISK MANAGEMENT FORM

### 1.0 CUSTOMER INFORMATION:

CONTACT INFORMATION	NAME	PHONE NUMBER	E-MAIL
<b>PURCHASING</b>			
<b>QUALITY</b>			
<b>ENGINEERING</b>			
<b>ACCOUNTING</b>			

### 2.0 QUALITY QUESTIONS

#### 2.1 REGULATORY REQUIREMENTS

PLEASE SELECT THE APPLICABLE STANDARD

ISO 9001	N/A	AS 9100	N/A	ISO 13485	N/A	FDA	N/A	ITAR	N/A
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#### 2.2 CUSTOMER SPECIFIC SUPPLIER SPECIFICATIONS

PLEASE SELECT WHICH SUPPLIER SPECIFICATIONS APPLY

NOTES

CUSTOMER APPROVED VENDOR LIST	<input checked="" type="checkbox"/>	MUST USE PSP APPROVED VENDORS, PURCHASE ORDER MUST BE ISSUED THRU PSP LIST THE LOCATION OF THE APROVED VENDOR LIST
SHIPPING AND PACKAGING INSTRUCTIONS	<input checked="" type="checkbox"/>	MUST USE PSP SUPPLIED FAIR AND SHIP PER SHIPPING INSTRUCTIONS IF YES SUPPLY A COPY AND LIST THE DOCUMENT NUMBER AND REVISION LEVEL
SHIPPING METHOD	<input type="checkbox"/>	SUPPLIER TRUCK
OTHER SUPPLIER REQUIREMENTS	<input type="checkbox"/>	IF YES SUPPLY A COPY AND LIST THE DOCUMENT NUMBER AND REVISION LEVEL

#### 2.3 ACCEPTANCE RECORDS

PLEASE SELECT WHICH ACCEPTANCE RECORDS ARE REQUIRED

NOTES

FIRST PART INSPECTION REPORT	<input checked="" type="checkbox"/>	SUPPLIED BY CUSTOMER PLEASE NOTE IF AS9102 REPORT IS REQUIRED
STATISTICAL PROCESS CONTROL	<input checked="" type="checkbox"/>	SUPPLIED BY CUSTOMER (AQL 1.0 UNLESS OTHERWISE SPECIFIED) PLEASE NOTE THE REQUIRED AQL LEVEL
MATERIAL CERTIFICATION	<input checked="" type="checkbox"/>	REQUIRED PLEASE NOTE IF THE MATERIAL MUST BE 1.) DOMESTIC 2.) RoHS 3.) D.F.A.R. COMPLIANT
OUTSIDE PROCESS CERTIFICATION	<input checked="" type="checkbox"/>	REQUIRED PLEASE NOTE IF THE OUTSIDE PROCESS MUST BE 1.) NADCAP 2.) RoHS 3.) D.F.A.R. COMPLIANT

**2.4 DEVICE MASTER RECORDS AND DEVICE HISTORY RECORDS**

PLEASE SELECT THE APPROPRIATE DOCUMENT RETENTION SECTION

NOTES

SUPPLIER WILL KEEP ALL DMR/DHR RECORDS FOR 10 YEARS, ELECTRONICALLY.

OTHER

PLEASE NOTE CUSTOMER SPECIFIC REQUIREMENTS

**2.5 INSPECTION EQUIPMENT**

PLEASE SELECT INSPECTION EQUIPMENT USED AT INCOMING INSPECTION

YES

NO

NOTES

OGP SYSTEM



SEE INSPECTION REPORT

PLEASE LIST MAKER AND MODEL

CMM



SEE INSPECTION REPORT

PLEASE LIST MAKER AND MODEL

**2.6 CHECK LIST**

PLEASE SELECT IF THE FOLLOWING ITEMS ARE AVAILABLE

YES

NO

NOTES

BALLOONED DRAWING



CMM PROGRAMS



NOT AVAILIABLE

CUSTOMER SPECIFIC FIRST PART REPORT



INSPECTION PLAN



**2.7 OTHER**

PLEASE LIST ANY OTHER CUSTOMER SPECIFIC INFORMATION

FIRST PART INSPECTION IS REQUIRED ON EVERY NEW JOB (FIRST TIME RUN) PRIOR TO PRODUCTION RUN

**3.0 REVISION CONTROL:**

EFFECTIVE DATE	PART NUMBER	REV.	DESCRIPTION OF CHANGE
2/4/2012	PEAR-7.1.2-010	A	Initial Release

This form will be maintained as Record and stored and maintained electronically at: O:\CUSTOMER NAME\5\_ACCEPTANCE RECORDS\1\_RISK MANAGEMENT FORM & SHIPPING INSTRUCTIONS