

**Source Inspection**

**Part Inspection**

**Instructions**

- Source inspection must be completed for each shipment of product assigned CDR-005. BAE Systems may waive the source inspection at its discretion.
- This request does not include Government Source Inspection. Only the DCMA can schedule Government Source Surveillance/Inspection.
- Submit form to Supplier Quality Assurance in advance of the shipping date for scheduling resources and travel. Requests submitted less than 5 working days prior to the requested inspection date can cause delay in shipment resulting in a negative impact to the supplier's rating.
- Submit Request by e-mail to the appropriate buyer or defined representative:
  - [pgayork.landa@baesystems.com](mailto:pgayork.landa@baesystems.com) (York)
  - [sga.anniston@baesystems.com](mailto:sga.anniston@baesystems.com) (Anniston)
  - [sqaaiken.pands@baesystems.com](mailto:sqaaiken.pands@baesystems.com) (Aiken)
  - [sgasterlinghts.pands@baesystems.com](mailto:sgasterlinghts.pands@baesystems.com) (Sterling Heights)
  - [gs.sqasanjose@baesystems.com](mailto:gs.sqasanjose@baesystems.com) (San Jose)
- Drawings and/or documents which define the product need to be transferred to BAE Systems through a secure file transfer system. If you need assistance, please contact your approved Supply Chain Representative
- A BAE Systems employee will assign disposition, sign the bottom of this form, and provide a copy to the requestor for their records. A copy of the completed form is to be shipped with the product.

**Supplier Information**

Supplier: \_\_\_\_\_ Site Number: \_\_\_\_\_ CAGE: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Point of Contact: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Requested Date of Inspection: \_\_\_\_\_

**Part Information**

Item Number	Item Description	PO No.	PO Line	Release No.	Promise Date (from PO)	Qty.	Disp

**BAE Acceptance Inspection Disposition Legend:**  
**A=accept; WO=Insp. Waived, one shipment; R=Rejected**

**--- For BAE Systems use only ---**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

**Attach copy of the completed form to the packing list or ASN for each shipment.** \*Waiver of inspection does not constitute product acceptance. Inspection at destination performed at the discretion of BAE Systems.