



Part Submission Warrant

Part Name _____ Part Number _____

Safety and/or Government Regulation Yes No Engineering Drawing Change Level _____ Dated _____

Description of Change _____ Purchase Order No. _____

SUPPLIER MANUFACTURING INFORMATION

SUBMISSION INFORMATION

Supplier Name & Supplier Code _____

Dimensional Materials/Functional Appearance

Street Address where manufactured _____

Customer Name/Division _____

City/State/Postal Code _____

AAR Buyer _____

REASON FOR SUBMISSION

- Initial Submission
- Engineering Change(s)
- Tooling: Transfer, Replacement, Refurbishment, or addition
- Correction or Discrepancy
- Tooling Inactive > 1 year
- Change to Optional Construction or Material
- Sub-Supplier or Material Source Change
- Change in Part Processing
- Parts Produced at Additional Location
- Other - please specify below

REQUESTED SUBMISSION LEVEL (Check one)

- Level 1 - Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to customer.
- Level 2 - Warrant with product samples and limited supporting data submitted to customer.
- Level 3 - Warrant with product samples and complete supporting data submitted to customer.
- Level 4 - Warrant with Full Dimensional Inspection Records, Material Certifications and Certificate of Conformance.
- Level 5 - Warrant with product samples and complete supporting data reviewed at supplier's manufacturing location.

SUBMISSION RESULTS

A. The results for dimensional measurements material & functional tests appearance criteria statistical process package
B. These results meet all drawing and specification requirements: Yes No (If "No" - Explanation Required Below)

EXPLANATION: _____

DECLARATION

I hereby affirm that the samples represented by this certification are representative of our parts, have been made to the applicable customer drawings & specifications, and are made from the specified materials on regular production tooling with no operations other than the regular production process. I also certify that documented evidence of such compliance is on file and available for review.

EXPLANATION/COMMENTS: _____

Print Name _____ Title _____ Phone # _____ Fax # _____

Supplier Authorized Signature _____ Date _____

FOR AAR Mobility Systems USE ONLY (IF APPLICABLE)

Part Warrant Disposition: Approved Rejected Interim Approval | Part Function Approval: Approved Waived NA

COMMENTS: _____

Customer Name _____ Customer Signature _____ Date _____

AAR Part Submission Warrant Explanation Sheet

PART INFORMATION

1. **Part Name** Engineering released finished end item part name.
2. **Customer Part Number:** Engineering released finished end item part number.
3. **Safety/Regulated Item:** "Yes" if so indicated on part drawing such as a CSI (Critical Safety Item), otherwise "No".
4. **Engineering Change Level & Approval Date:** Show change level and date it was released/approved.
5. **A brief description of the latest change identified on the drawing.**
6. **Purchase Order Number:** Enter this number as found on the purchase order.

SUPPLIER MANUFACTURING INFORMATION

7. **Supplier Name & Supplier Code:** Enter Supplier ID assigned to the manufacturing location
8. **Supplier Manufacturing Address:** Enter the complete address of the location where the

SUBMISSION INFORMATION

9. **Submission Type:** Check box(es) to indicate type of submission.
10. **Customer Name:** Enter AAR Mobility Systems
11. **Buyer Name:** Enter AAR buyer's name.
12. **Reason for Submission:** Check appropriate box. When necessary, add explanatory details in the "Other"
13. **Requested Submission Level:** Check submission level and circle or bold the requirements requested by AAR.

SUBMISSION RESULTS

14. Check the appropriate boxes applicable to the submission: dimensional, material tests,
15. Check appropriate box to indicate if the results meet drawing and specification requirements.

DECLARATION

16. **Explanation/ Comments:** Provide any explanatory details or references to the submission results;
17. **Supplier Authorized Signature and other information:** The responsible supplier official,

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Leave blank.