FIRST ARTICLE INSPECTION REPORT

1. PART NAME 2.			PART NUMBER		3. CHG / ED. AND ISS. 4. SERIAL NUMBER					
5. SUPPLIER NAME			6. MANUFACTURING LOCATION/SUPPLIER CODE		7. SHOP ORDER NO.	REVISION				
10. COMMENTS							8. PURCHASE DOCUMEN	8. PURCHASE DOCUMENT NO.		
			11. NONCONFORMANCE DOCUMENTS			12. RESULTS PARTS ACCEPTABLE: YES NO FOLLOW-UP REQUIRED: YES NO				
13.	14.	15.	16.	17. 18.			19.			
LINE	ZONE/ SHEET	FAI/DESIGN CHARACTERISTICS	STICS TOLERA		ACTUAL	REMARKS			VERIFICATION	
MDC 1010	(REV 17 Feb	2000)	CCEDTAN	^E					PAGE 1 OF	
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FORMS on the Intranet

FIRST ARTICLE INSPECTION REPORT (Continuation)

1. PART NAME			2. PART NI	UMBER	3. CHG / ED. AND ISS. 4. SERIAL NUMBER	3. CHG / ED. AND ISS. 4. SERIAL NUMBER			
13. LINE ITEM	14. ZONE/ SHEET	I. 15. NE/ FAI/DESIGN EET CHARACTERISTICS TOI		17. ACTUAL	18. REMARKS	19. VERIFICATION			

MDC 1016 (REV 17 Feb 2000)

SUPPLIER ACCEPTANCE				PAGE	OF
_	NAME (PRINT)	STAMP	DATE		

Instructions First Article Inspection (FAI) Report for form MDC 1016

- 1. PART NAME Nomenclature of the article listed in block (2).
- **2. PART NUMBER** Part number when delivered to engineering drawing requirements.
- **3. CHG/ED. and ISS.** Change Letter or Edition and Issue of the part number, as applicable.
- 4. SERIAL NUMBER Part serial number.
- **5. SUPPLIER NAME** Name of the Supplier that appears on the purchase document.
- **6. MANUFACTURING LOCATION/SUPPLIER CODE** Location where part was physically manufactured and the supplier code referenced on the purchase document.
- **7. SHOP ORDER NUMBER** Supplier shop order number and current revision.
- **8. PURCHASE DOCUMENT NUMBER** Purchase document number imposing FAI requirements.
- **9. CHANGE NUMBER -** Latest purchase document change in place at the time of FAI.
- **10. COMMENTS** Enter any general comments related to the First Article Inspection that are not documented in block (18).
- **11. NONCONFORMANCE DOCUMENTS** Nonconformance documents issued against the part number, or parts contained therein, during the manufacturing and First Article Inspection process.
- 12. RESULTS Document as follows:

PARTS ACCEPTABLE:

- Check YES when the article inspected conforms to ALL design characteristics.
- Check NO when the article does not conform to ALL design characteristics.

FOLLOW-UP REQUIRED

• Check YES when other actions related to FAI completion remain outstanding (planning paper release, tool prove-out, Engineering Order release, etc.).

NOTE: When "Follow-up" is checked, list the reasons for follow-up in block (18).

• Check NO when part acceptable is marked YES and all outstanding actions related to FAI completion have been accomplished.

- **13. LINE ITEM** Sequential numerical listing of FAI/Design characteristics being reported, starting with the number (1). Circle the line item number when block (17) is outside block (16) tolerance or when block (17) indicates reject.
- **14. ZONE/SHEET** Drawing zone and sheet number where design characteristic(s) are located.
- **15. FAI/DESIGN CHARACTERISTICS** All design characteristics which include, but may not be limited to, dimensions, drawing notes, Test Procedures, and special manufacturing instructions.
- **16. TOLERANCE** Design characteristic tolerance parameters.
- 17. ACTUAL Actual results from inspection of specified design characteristics. Accept or Reject is acceptable only when non-numerical actuals are obtained.
- **18. REMARKS** Remarks which are related to design characteristics as applicable. Remarks shall include, but not be limited to, name of D1-4426 processing organization, certification numbers, date verification was made that processing organization held D1-4426 process approval, supplier data transmittal reference accepting data items, etc.
- **19. VERIFICATION** Apply stamp when verifications(s) are made to supplier recorded actuals and for verification that each D1-4426 process house noted in block (19) held Boeing approval at the time of processing. Apply stamp adjacent to follow-up items listed in block (18) when follow-up is completed.

SUPPLIER ACCEPTANCE:

PRINTED NAME - Printed name of Supplier personnel completing the form
STAMP - Stamp impression of Supplier personnel completing the form.
DATE - Date Supplier personnel completed the form.
PAGE 1 OF - Enter total number of pages contained in FAI Report.