

**Form 2 - "Product Accountability – Materials, special processes and functional testing"**

1. Part Number		2. Part Name		3. Serial Number		4. FAI Report Number	
5. Material of process	6. Specification Number	7. Code	8. Special Process Supplier Code	9. LH Approval Verification (Yes, No, N/A)	10. Certificate of Conformance number		
11. Functional Test Procedure Number:		12. Acceptance Report Number:					
13. Comments							
14. Signature				15. Date			

**QRS.101.F02 “Product Accountability – Materials, special processes, and functional testing” - Filling Instructions**

This form is used if any materials, special processes, or functional testing is defined as a design characteristic.

NOTE: Data fields 1 thru 4 are repeated on all forms for convenience and traceability. Any subsequent changes to “data fields” 1 thru 4 need to be made to all pages.

1. (R) **Part Number:** Number of the FAI part (e.g., LH part number contained on the purchasing documents; part number from the associated Bill of Materials (BOM); manufacturer part number for internal parts, when LH part number is not available].
2. (R) **Part Name:** Name of the FAI part.
3. (CR) **Serial Number:** Serial number of the FAI part; unique identifier assigned to a detail part, sub-assembly, assembly, or installation by the organization or LH.
4. (CR) **FAIR Number:** Reference number that identifies the First Article Inspection Report (FAIR); this may be an internal report number.
5. (CR) **Material or Process Name:** Name of applicable materials or special Processes
6. (CR) **Specification Number:** Provide the following information:
  - Material specifications number (include permitted alternates, if used), class and material form (e.g., sheet, bar) for all materials incorporated into the FAI part (e.g., weld/**braze filled materials, ball for ball brazing, etc.**).
  - **“Make From” materials that are incorporated into the FAI Article.**
  - Special process specifications; including class, if applicable, and permitted substitutions.
  - If standard catalogue items (e.g., fasteners) are modified, then list that standard hardware.

**Do not include processing materials such as acid etchants.**

NOTE: Non-modified standard catalogue items are listed on Form 1, “Part Number Accountability”.

7. (O) **Code:** Any required code from the LH for material or process listing, as applicable

8. (CR) **Special Process Supplier Code:** Identify supplier name, address, and code performing special processes or supplying material. Supplier name and address may be used, when supplier code is not available or not adequate for identification.
  9. (CR) **LH Approval Verification:** Indicate if the special process(es) or material sources are approved by LH. Enter “Yes” if approved; “No” if approval is required, but process source is not approved; or “NA” if LH approval is not required.
  10. (CR) **Certificate of Conformance Number:** Special Process completion certification and/or test report (e.g. special process completion certification, raw material test report number, modified standard catalogue item compliance report number, traceability number).
  11. (CR) **Functional Test Procedure Number:** Functional Test Procedure number identified as a design characteristic.
  12. (CR) **Acceptance Report Number:** The functional test certification indicating that test requirements have been met.
  13. (O) **Comments:** Provide supporting comments, as applicable.
  14. (R) **Signature:** Printed name or unique identification, and signature of the person who prepared and approved this form. Signature indicates that all applicable materials, special processes, and functional testing are accounted for, meet requirements, are properly documented, and all associated non-conformances are documented on Form QRS.101.F03 (or EN9102:2014 equivalent one) “Characteristic Accountability, Verification, and Compatibility Evaluation”.
- NOTE: Electronic identification and signature are both acceptable.
15. (R) **Date:** Date when this form was completed.

Note: Each input field is identified as:

- **(R) - Required:** this is mandatory information.
- **(CR) - Conditionally Required:** this field *shall* be completed when applicable to the article (e.g. serial number shall be entered where there is a serial number) or when required by Leonardo Helicopters.
- **(O) - Optional:** this field is provided for convenience; the field may be left blank.