SIKORSKY AUDIT REPORT *****This document contains no technical data subject to the ITAR or the EAR.*****								
PAGE: 1 OF 1							1	
SUPPLIER: Luvak				CODE: SP1013				
ADDRESS: 722 Main Street			-		CODE.		1013	
Boylston, MA 01505			- FLI	FLIGHT SAFETY: YES NO X				
CONTACT: Derek Langlois			TEL.: 508-869-6401					
TITLE: Quality Manager			FAX.: <u>NA</u>					
				E-MAIL: <u>derek.langlois@luvak.com</u>				
SIKORSKY REP: Michael Pond			AUDIT DATE: 2/5/2018					
SPECIAL PROCESS SURVEYS/AUDITS: DISF			OSITION CODE:					
	SPECIFICATION:	A	С			REMARKS/LIMITATIONS:		
	ASTM E 548, 882, 416, 743, 851	Х				otes 7 & 9		
					1			
								
					<u> </u>			
DISBOSI	TION CODES: A - ADDROVED C - CONDITIO	NAL ADDE	OVAL	\A/ \/	VITUUEI	Б		
DISPOSITION CODES: A = APPROVED, C = CONDITIONAL APPROVAL, W = WITHHELD REMARK CODES:								
1 = INTERNAL USE ONLY (CAPTIVE)								
2 = APPROVAL OF FACILITIES ONLY - A WRITTEN PROCEDURE FOR EACH PART NUMBER MUST BE APPROVED. 3 = LIMITED TO PRECIPITATION AGING ONLY. 4A = LACK OF ACTIVITY ARE PROCESS DISCONTINUED.								
4A = LACK OF ACTIVITY 4B = PROCESS DISCONTINUED 4C = QUALITY PROBLEM 5A = EXCLUDING 7075T73 5B = INCLUDING 7075T73 6 = NOT AUDITED AT THIS TIME. CONTINUED APPROVAL BASED ON AUDIT OF:								
7 = NADCAP APPROVED (NON CAPTIVE)								
8 = INTERPRETATION OF INDICATIONS IN ACCORDANCE WITH SS8802, SS8805, OR SS8806								
9 = AUDIT APPROVED BASED ON NADCAP CERTIFICATION. CERTIFICATION # 3481174254								
10 =								
APPROVED UNITS (i.e. FURNACES / TANKS):								
NDI CERTIFIED LEVEL III PERSONNEL:								
PRODUC	T ORIENTED (QUALITY SYSTEM) ASSESSME	NTS:				DISPOSITIO	V CODE:	
	TYPE:					Α	187	
(CHECK BELOW AS APPLICABLE) INITIAL ASQR-01 GROUP 1 (FLIGHT SAFETY)						A C	W	
INITIAL ASQR-01 GROUP 1 (PEIGHT SAFETY)					h		 	
INITIAL ASQR-01 GROUP 2								
GROUP 1 PRODUCT/PROCESS CONFORMITY AUDIT								
PRODUCT/PROCESS CONFORMITY AUDIT INCLUDING F/S								
FOCUSED FLIGHT SAFETY AUDIT (BLITZ) GROUP 2 PRODUCT/PROCESS CONFORMITY AUDIT								
OTHER								
		1						
S/A MANAGEMENT REVIEW: fakel of the page DATE: 2/5/18								(8
	/		- 1					

SA 5195-1 Revision 05/10/2016

Verify current revision of form