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| **SELLER AIRFRAME TOOLING DECLARATION**  **(When Receiving Buyer Furnished Tools)**   |  |  | | --- | --- | | **Seller:** | **Date:** | | **Address:** |  | | **Vendor Number:** |  |  |  | | --- | | This form shall be filled out completely upon receipt of any Buyer Furnished Tool and copy provided to Buyer assigned Quality Representative. | | | | |
| DESCRIPTION | TOOL NUMBER PART NUMBER | | COMMENTS/DECLARATION |
| List all Buyer Furnished Tools associated with the received shipment, including corresponding Part Number. |  |  |  |
| List all Buyer Furnished Tools in useable condition at time of receipt? |  |  |  |
| List all Buyer Furnished Tools in need of rework or repair at time of receipt. Also, declare the status of each tool that requires rework or repair by initiating a SATR per TMS-MC-015 instructions in Part I, Section 2.13, if applicable. |  |  |  |

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| **If additional space is required to fully document, comment or declare relative information, please continue on a separate sheet and attach to this form. You are an important part of our airframe team, thank you for your diligence assisting Lockheed Martin maintain the integrity and configuration of the product we deliver to our customers.** |