HOWMET AEROSPACE

Supplier Request Form
Authorization to add Supplier to Approved Supplier List

Requested by:		**Date:**	
Facility:			
Reason for Addition:			
Reason for not using current source on ASL; e.g. capacity, pricing, technical, delivery, freight, etc.			
Is the New Supplier ISO/AS or Nadcap Certified?		**Yes** ☐ **No** ☐	
List 3rd party Accreditation(s) Held			
List Other Suppliers Contacted:			
Supplier :		**ASL#:**	
Supplier :		**ASL#:**	
Supplier :		**ASL#:**	

Supplier Requested to be added:

Email Address:			
Address:			
City:			
State:		**Zip Code:**	
Telephone:		**Fax. No:**	
Contact Name:		**Customer Approved:**	**Yes** ☐ **No** ☐
Type of Product/Service:			

Accounting Information

Terms: Arconic Mandate net 90 for all suppliers under terms, does new supplier agree to these terms? * May vary by country****	**Yes** ☐ **No** ☐
Tax ID (W9 form required)	**Estimated Yearly Spend $$**

Purchasing

Approved:	**Yes** ☐ **No** ☐	**ASL Group No. 1-11**	
Reason for Not Approving:		**Denial List**	**Yes** ☐ **No** ☐
Oracle Supplier #		**Misc: Info.**	

Quality / Engineering / Purchasing signatures are required to add a supplier

QA Manager		**Date:**	
Engineering		**Date:**	
Purchasing		**Date:**	
Supply Chain		**Date:**	
Mfg. Engineering		**Date:**	
Production		**Date :**	