BY ORDER OF THE COMMANDER
ROBINS AIR FORCE BASE

ROBINS AIR FORCE BASE INSTRUCTION 63-510

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Acquisition

DEFICIENCY REPORTING, INVESTIGATION, RESOLUTION AND EXHIBIT MANAGEMENT

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This instruction aligns with TO 00-35D-54, *USAF Deficiency Reporting, Investigating and Resolution*, AFMAN 23-110, *Basic USAF Supply Manual*, DLAR 4155.24, *Aircraft and Equipment Maintenance Management, Air Force Materiel Command Instruction (*AFMCI) 63-510, *Deficiency Reporting, Investigation and Resolution* and AFMCI 21-130, *Depot Maintenance Materiel Control.* It applies to all Robins Air Force Base (RAFB) wings/groups that manage USAF weapon systems/end items/ and Defense Distribution Depot, Warner Robins, Georgia (DDWG). This instruction assigns key personnel responsibilities, outlines procedures and standardizes the deficiency reporting and investigating process and exhibit handling. It will be used to supplement the information contained within applicable technical data and instructions to administer the deficiency reporting process at the RAFB. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using Air Force (AF) Form 847, *Recommendation for Change of Publication;* route AF Form 847 from the field through the appropriate functional's chain of command. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with (IAW) Air Force Manual (AFMAN) 33-363, *Management of Record*s, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at **https://www.my.af.mil/gcss-af61a/afrims/afrims/.** See Attachment 1 for a glossary of references and supporting information.

SUMMARY OF CHANGES

This document is substantially revised and must be completely reviewed.

1. Key Responsibilities.

1.1. The Single Point of Contact Office (SPOCO), AFLCMC/EZGEDA, is the base designated OPR for the deficiency reporting (DR) process and is responsible for screening PQDRs, EIs and T&Es submitted through the Joint Deficiency Reporting System (JDRS) on RAFB managed weapon systems/end items/commodities. The SPOCO is responsible for developing policy/procedures and monitoring the health of the DR process. In addition, SPOCO is the base OPR for TO 00-35D-54.

1.1.1. SPOCO will conduct periodic center level Deficiency Reporting, Investigation and Resolution (DRI&R) meetings.

1.1.2. SPOCO will conduct annual Staff Assistance Visits (SAV) within all maintenance and acquisition/sustainment groups involved in the deficiency reporting process. These SAVs will be performed during the first quarter of the calendar year.

1.2. The Program Manager (PM) implements the deficiency reporting process for assigned systems/end items/commodities and will review deficiency report data at least quarterly. Program management responsibilities for deficiency reporting reside at both system/end item and sub-system/National Stock Number (NSN) levels. The terms System Program Manager (SPM) and Sub-System Program Manager (SSPM) will be used throughout this instruction in order to clearly define and differentiate the PM responsibilities outlined in TO 00-35D-54. Depending on their portfolio, a PM may have responsibilities at both levels.

1.2.1. The SPM is defined as the single manager with Operational Safety, Suitability, and Effectiveness (OSS&E) responsibilities at the platform, system, or end item level. The SPM will develop a DRI&R charter to document the management process for maintaining oversight of the DR process for their assigned system(s). The SPM has final authority for categorization of a DR. The SPM will consolidate and maintain visibility of system level metrics to detect trends and take appropriate action for all DRs against their system, regardless of where the DR may be assigned. The SPM will establish warranty DR guidance for system level warranty items. The SPM will conduct quarterly system level Materiel Improvement Project/DR Review Boards (MIPRB) as outlined in **paragraph 1.5** of this instruction. The SPM will review all Category I (CAT I), Critical Safety Items (CSI) and Mishap/High Accident Potential (MHAP) related DRs and take

appropriate actions to mitigate the risk to affected systems. Procedures shall be developed by the PM to ensure the immediate response to a CAT I DR will ensure safe operation of the system/item and the mitigation action is approved by the Chief Engineer (CE).

1.2.2. The SSPM is defined as the single manager with OSS&E responsibility at the sub-system, product group, or item level. The SSPM will develop a charter to document implementation and management of the DR process for assigned product lines. The SSPM will immediately notify the SPM of all CAT I, CSI and MHAP related DRs. The SSPM is responsible for notifying the originator and other affected organizations of any safety mitigation actions mandated by the SPM. This acknowledgement may include an approved work-around, restriction to item usage and/or inspection/Time Compliance Technical Order (TCTO) to determine the full impact of the DR condition. The SSPM will assign Action Points to support the DR program within each product line. The SSPM will consolidate and maintain visibility of sub-system level metrics to detect trends and take appropriate actions. They will ensure timely resolution and closing actions on all DRs. The SSPM will establish warranty guidance on all items other than aircraft level items. The SSPM will conduct quarterly sub-system level MIPRBs as outlined in **paragraph 1.5** of this instruction.

1.3. The CE is the senior technical authority and advisor to the SPM or SSPM. The CE is responsible for technical activities within the DR process to ensure OSS&E compliance. The CE will develop procedures which ensure the appropriate review of all deficiency reports and their closing actions and will approve closure of all CAT I, MHAP related and CSI DRs. These procedures will be documented in the DRI&R charter. As part of the DRI&R charter, the CE will establish and document local procedures to request DR exhibits for teardown and analysis. The exhibit investigation procedures should be specific enough to allow the Action Point (AP) to determine when an exhibit investigation is required. Investigations are restricted to those situations involving new failure modes, suspected safety of flight defects, workmanship, warranty failures on new or newly reworked items, requests by safety investigation authorities, or as required by specific trend analysis conclusions. The CE approves investigation and resolution actions on all CAT I DRs.

1.4. The AP is designated by the PM to administer and oversee the DR process. Their continuous involvement is key to the success of the deficiency reporting program. The AP will ensure that each DR is reviewed by the appropriate subject matter experts as necessary, to establish necessary actions to be taken to resolve the deficiency. This review must be conducted within the established guidelines for the DR category and will include a review of the item deficiency history and if needed contacting the Originating Point (OP) for any additional or missing information needed to work the report. The review will determine if an investigation is warranted and the appropriate avenue for conducting the investigation, i.e. Sustaining Engineering Project, local project through base facilities, organic test facilities at other locations, or internal review. Formal documentation of each investigation will be maintained and periodic reviews will be conducted during the investigation.

1.5. **MIPRBs will be conducted at least quarterly by the SPM and/or SSPM.** Each PM shall chair or designate a chairperson for the MIPRB. The CE will provide technical approval of MIPRB activities described in TO 00-35D-54. CSI deficiencies for aviation systems will be

reviewed and trended during the MIPRB. MIPRB minutes will be kept for all review boards and will contain the information outlined in TO 00-35D-54.

1.5.1. The SPM will conduct a system level MIPRB at least quarterly. This review will include those DRs maintained and processed at RAFB and the other Complexes assigned to their system(s). The Weapon System Supply Chain Managers (WSSCM) will provide the information and metrics for the system MIPRB. SSPM and/or their CE will attend the system level MIPRB as required.

1.5.2. The SSPM will conduct a sub-system level MIPRB at least quarterly. This review will include those DRs maintained and processed within their assigned product lines. Information discussed at the sub-system level review will be rolled up for inclusion in the system level MIPRB as required.

1.6. The Foreign Military Sales (FMS) Program plays an important part in the DR process. The Air Force has a Technical Coordination Program/Technical Coordination Group (TCP/TCG) designed to provide follow-on support to continue improving serviceability, maintainability, and reliability for FMS equipment and systems. Foreign countries participating in the TCP who operate equipment and systems manufactured in the United States submit DRs through the FMS Program office at RAFB. This is accomplished by personnel performing the following functions:

1.6.1. The Screening Point within the FMS Home Office or support organization receives the deficiency from the participant country and inputs the data into JDRS.

1.6.1.1. Once the data is loaded into JDRS, SPOCO receives the DR and determines the responsible organization that will investigate the deficiency. SPOCO screening points review the DRs for proper categorization, validity and correctness of entries and workflows the DR to the appropriate Action Point unit.

1.6.1.2. If requested, SPOCO will assist the TCP/TCG in resolving any technical problems they may encounter while attempting to load the data into JDRS.

1.6.2. The AP initiates a course of action by coordination with engineering, item managers, equipment, and quality specialists. The AP provides status updates, closing actions through coordination with the Originating Point (OP) and exhibit disposition instructions to the OP. The AP shall monitor the DR through resolution and direct all requests for additional information to the TCP/TCG Screening Point.

1.6.3. The Support Point (SP) works with the AP by determining root cause, recommends corrective and preventative actions, and conducts investigations and trend analyses. The SP provides the AP with investigation findings and repair actions to close the DR.

1.7. Each program management organization shall notify the SPOCO office of any personnel moves into or out of DR SPM, SSPM, CE and AP positions. The SPOCO maintains a list of all current key DR positions to ensure all DR reports are properly routed and key personnel notified within the established timeline goals.

2. DR Flow Procedures. The RAFB DR Flowchart can be viewed in **Attachment 2**.

2.1. **Originator Responsibilities:**

2.1.1. Identify and documents conditions which limit or restrict an item or system from being used for its intended purpose.

2.1.2. Comply with the originator responsibilities specified by TO 00-35D-54, chapters 2,3,5, and 6.

2.1.3. Notify the applicable group quality organization or group OPR when a suspected part/materiel deficiency exists.

2.1.4. Retain all available packaging containers, shipping documents, serviceable tags, labels and other documentation pertaining to the deficient materiel.

2.1.5. Give the designated group quality representative or group OPR any information that will aid in preparing/processing the DR.

2.1.6. Hold all items required for exhibit purposes, ensuring that deficient materiel is properly identified, segregated and protected.

2.2. **Originating Point (Warner Robins Air Logistics Complex [WR-ALC]) Responsibilities:**

2.2.1. Comply with the OP responsibilities specified by TO 00-35D-54, chapters 2,3,5 and 6.

2.2.2. Ensure DRs are prepared and processed as follows:

2.2.2.1. DRs will be prepared IAW TO 00-35D-54 and classified either CAT I or Category II (CAT II). Ensure the correct Support Team (ST) is entered into the report by using the ST Lookup tool within JDRS.

2.2.2.2. Ensure the reported discrepancy is valid by checking for form, fit and function. Ensure all pertinent data is loaded into the report to include contract number, requisition number, end item information, supply unit for shipping and exhibit disposition data.

2.2.2.3. A record file will be established for each deficiency reported. As a minimum, the log must contain the report control number; the name of the originator responsible for processing the DR, the NSN, nomenclature, JDRS submission date, AP assigned and the date the deficiency was discovered.

2.2.2.4. Exhibits will be routed through the Weapon System Support Center (WSSC) or Shop Service Center (SSC). The deficiency exhibit holding activity is the Exhibit Holding Warehouse-Robins AFB unit within JDRS.

2.2.2.5. Exhibits will be kept in a secure and appropriate holding area separated from serviceable and repairable assets until the exhibits are turned in to the WSSC or SSC.

2.2.2.6. Track the DR progress weekly until it is closed via JDRS. If no action has been taken on the DR within 30 days from input, the originating point will contact the action point to request an updated status.

2.2.2.7. Ensure all follow-up actions are documented (Tech Dialog) and continued as often as needed to assure a response if exhibit disposition instructions are not received within DR timeline goals. Once received the initial disposition instructions shall be followed to ensure exhibits are not mis-routed or mis-shipped.

2.2.2.8. An information copy of the DR will be furnished to the engineering/planning section, scheduling/inventory control section and production section of the group where the deficient item is used.

2.2.2.8.1. An information copy of a software-related DR will be furnished to the software support center section of the group where the software is used.

2.2.2.8.2. Ensure the interim reply from the software DR AP includes information on action taken or planned, assigned control number and priority.

2.2.2.9. Provide feedback to all concerned activities regarding DR status and corrective action. Ensure individual/organization originating the DR is informed of the closing action and rebuttal option.

2.2.2.10. Credit is automatically authorized for Product Quality Deficiency Reports (PQDR) when an exhibit is turned in to supply in condition code "Q". When credit is not authorized, TO 00-35D-54, paragraph 4.11 applies.

2.2.2.11. When notified that an item or materiel is deficient, make sure only deficient materiel in WSSC or SSC and shop areas are placed in a hold status. Due-ins from maintenance items must be processed IAW prescribed directives.

2.2.2.12. For each item requiring separate identification, prepare two DD Form 1575 (**Suspended Tag-Materiel),** and two DD Form 2332 (**Product Quality Deficiency Report Exhibit)**, ensure that Report Control Number (RCN) and Deficiency Report Unique Identifier (DRUI), signature, stamp and or printed name are on both tags. IAW TO 00-35D-54 Items will be condition coded "Q". Place one DD Form 1575, one DD Form 2332 and a copy of the DR in an envelope and securely attach to the exhibit.

2.2.2.12.1. Determine the correct materiel classification and if classified, annotate accordingly the DD Form 1575 and DD Form 2332 attached to the exhibit. Do not put materiel classification on the DD Form 1575 and 2332 that will be affixed to the outside of the shipping containers.

2.2.2.12.2. Place remaining DD Form 1575 and 2332 in an envelope, along with a copy of the DR with a note stating, "Attach to outside of packaging container."

2.2.2.13 Notify the appropriate WSSC or SSC personnel that the exhibit is ready for turn-in. Post the document number (assigned to transfer exhibits from WR-ALC to the holding activity) in the DR record file and tech dialog in JDRS.

2.3. **WR-ALC Scheduling/Inventory Control Functions**

2.3.1. When notified that the exhibit items are ready for turn-in, prepare the necessary documents and forward the materiel to the appropriate WSSC/SSC receiving and processing function not later than the second day after receipt of the DR message.

2.3.2. Furnish document numbers (for control purposes) to the OP, applicable flight, squadron and group OPRs.

2.4. **SPOCO Responsibilities:**

2.4.1. Monitor JDRS daily for new or transferred DRs.

2.4.2. Screen the new DRs to ensure that RAFB has management responsibility for the weapon system/end item/commodity reported (DO43A/DO86).

2.4.2.1. Transfer misrouted DRs to the appropriate ST (when known) or back to the Air Force Clearinghouse (when the ST is unknown).

2.4.2.2. Review reports for accuracy and validity of information provided.

2.4.2.2.1. PQDR reports must have the following information or the report will be rejected to the originator: New items must have Manufacturer name, any attachment to the JDRS record or an annotation from the originator that missing data is not available. Reworked or Repaired items must have Last Rework Activity (LRA), any attachment to the JDRS record or an annotation from the originator that missing data is not available. Unk or N/A must include any attachment to the JDRS record or an annotation from the originator that missing data is not available.

2.4.2.3. Verify the reports are properly classified as a PQDR, Engineering Investigation (EI) or Test and Evaluation (T&E).

2.4.2.4. Any changes made to the report by SPOCO personnel will be annotated in the Additional Comments field. This annotation will include the fields updated by SPOCO and the initials of the individual making the change.

2.4.3. Assign and forward DRs to the appropriate Action Point unit within JDRS.

2.4.3.1. Upon receipt of a CAT I DR, SPOCO will make positive contact with at least one of the following: SPM/SSPM, CE, AP or their replacement within two hours and will also notify everyone on the SPOCO POC listing for that organization via e-mail.

2.4.3.2. All CAT I DRs shall be forwarded within two hours to the appropriate Action Point unit.

2.4.3.3. All CAT II DRs shall be routed accordingly within two days.

2.4.4. When SPOCO receives an invalid report or the report cannot be validated the report will be rejected to the OP with a list of items/information required to process the report.

2.4.5. Will prepare center level metrics for the monthly Engineering Advisory Board (EAB) briefing. SPOCO will provide the metrics using data extracted from JDRS.

2.4.6. Will periodically hold SPOCO DR meetings. The meeting will address any concerns or changes in the DR process, exhibit timelines and exhibit goals metrics. As a minimum, SPOCO personnel, APs, SPs and OPs will attend. Other personnel involved in the DR process are encouraged to attend.

2.5. **Action Point Responsibilities:**

2.5.1. Upon receipt of a DR from SPOCO, the AP will review for correct categorization, completeness and accuracy of all information contained in the report. If additional information is needed the AP will contact the OP to obtain the information.

2.5.1.1. If the DR is invalid or validity cannot be determined perform credit reversal IAW TO 00-35D-54 Para 4.11.

2.5.1.2. Ensure CAT I reports meet the qualifications of TO 00-35D-54. If not, negotiate with the OP to try and change the report category. If unable to reach agreement, the PM will have final authority on categorization of all DRs. When downgrading the report, provide an explanation to the originating point in JDRS via the tech dialog function. The Additional Comments field shall be annotated with rationale for downgrade action to include the individual contacted concerning the downgrade.

2.5.1.3. If the item is new, special emphasis will be placed on ensuring that block 9 (Manufacturing data) is accurate. If the item was repaired ensure Block 12C (Last Rework Activity (LRA) data) is accurate. Accurate LRA data is critical for the organic support point activities to properly track those reports closed prior to being work flowed to the organic support points at RAFB.

2.5.1.4. Promptly acknowledge receipt of all DRs as soon as possible, but not later than 24 hours for CAT I DRs and 10 calendar days for CAT II DRs.

2.5.1.5. For CAT I DRs, notify SPM and CE for all affected systems. As part of the acknowledgement for CAT I DRs, enough information should be provided to mitigate possible safety issues until a final resolution is determined and fielded.

2.5.1.6. AP will assign Materiel Improvement Project (MIP) numbers, as required, on those DRs deemed necessary.

2.5.2. The AP, in conjunction with subject matter experts (Equipment Specialists (ES), Engineers, Quality Assurance Specialist (QAS), etc.) when required, will perform a table-top evaluation of the DR to determine the extent of the investigation required. They will use the investigation criteria provided by the CE. Along with the investigation criteria, they will review the information contained in the DR, historical records and trend data. If the report is closed administratively or as an acceptable risk, a closing report will be initiated by the AP.

2.5.2.1. If required, the AP will assign the appropriate SP unit within JDRS.

2.5.2.2. For DRs received with a Defense Logistics Agency (DLA) source of supply (SOS), DR assignment to the AP will be based on NHA/END item; If NHA is also DLA managed end item will be used to assign the DR. The AP will forward the report to DLA using the Inter-Service Application Programming Interface (IAPI) transfer system after any data corrections are made. For DRs forwarded to Defense Contract Management Agency (DCMA) or other Services, the AP will select the appropriate Support Point unit during the data review. The AP will update the report as needed with information provided by the other service AP or SP throughout the investigation.

2.5.3. If a credit reversal is deemed appropriate, annotate report per TO 00-35D-54, paragraph 4.11.

2.5.3.1. When a credit reversal is justified, AP will annotate the rationale for the credit reversal in the closing report. ***NOTE:*** For CAT I, MHAP, and CSI deficiencies, closing actions must be coordinated with System Chief/Lead Engineers prior to closing in JDRS.

2.5.4. If the AP and subject matter experts (when required) determine no further action is necessary, they will close the report administratively.

2.5.4.1. Select the most applicable closing action in the "Closing Action" field, in the "reason for closing" field put in the rationale for closing administratively. Populate the remaining asterisk fields with the appropriate responses; all text/comment boxes must be populated.

2.5.5. If the report requires exhibit investigation, the AP shall:

2.5.5.1. Approve the preliminary disposition request.

2.5.5.2. If the SP is an AF organic depot facility or contractor, provide exhibit disposition instructions to the OP as soon as possible but within 30 days, with targeted goals of 24 hours for CAT I DRs and 10 days for CAT II DRs.

2.5.5.3. Instruct the OP (JDRS tech dialog) to continue holding the exhibit an additional 60 days if the SP is another DoD component.

2.5.6. Monitor the progress of the investigation to include exhibit movement/status and SP investigation efforts, and follow up as necessary.

2.5.7. Provide status updates to the JDRS record as significant events occur, but not less than every 90 days.

2.5.8. Review the SP investigation findings with subject matter experts when necessary, to ensure that root cause, corrective action and preventive action, if applicable, have been addressed.

2.5.8.1. If SP reply is inadequate, notify SP via tech dialog and request re-evaluation.

2.5.8.2. If SP reply is adequate, finalize investigation report of DR and update the closing action, as appropriate.

2.5.9. If the investigation results confirm an invalid DR was submitted, request credit reversal IAW TO 00-35D-54 paragraph 4.11.

2.5.10. Periodically review/query JDRS for closed deficiency reports to ensure that no exhibits remain in the exhibit storage area. Notify the Exhibit holding activity of exhibit disposition instructions if exhibits are shown in a Warehouse Location.

2.6. **Support Point Responsibilities**

2.6.1. Acknowledge receipt of AP's request for investigation assistance in JDRS.

2.6.2. Schedule the exhibit for evaluation upon receipt of notification of exhibit receipt IAW the guidelines established in AFMCI 21-130.

2.6.3. Accomplish investigations as requested by the AP within 15 days for MHAP CAT I DRs, within 20 days for all other CAT I DRs and within 30 days for CAT II DRs after exhibit is inducted for evaluation.

2.6.4. Notify the AP of changes to the status of the investigation as changes occur. As a minimum, provide an interim or final reply to the AP within 15 days for MHAP CAT I DRs, within 20 days for all other CAT I DRs and within 30 days for CAT II DRs.

2.6.5. Determine cause of the reported condition. Identify failed part (part number, NSN), test procedure, software, process etc.

2.6.6. Recommend corrective and preventive action as necessary.

2.6.7. Evaluate opportunities to incorporate corrective measures on the system/equipment production line.

2.6.8. Provide a closing report of findings and actions taken to the AP. ***NOTE:*** It is vital that the final disposition instructions and if required, the final supply condition codes are followed to ensure proper and timely turn-in or processing of exhibits.

2.6.9. Process exhibits that are no longer required for analysis in accordance with AP/Item Manager direction and/or their condition and dollar value. This includes replacing the DD Form 1575 with the appropriate tag. If repair of the exhibit is authorized, return to serviceable condition by processing them ahead of similar Management of Items Subject to Repair (MISTR) items IAW AFMCI 21-130.

3. Exhibit Processing and Handling. ***NOTE:*** For organic investigations, if the AP is told there aren't funds available to process an exhibit in for investigation he/she should go to the group Production Management Officer/Production Management Specialist for further clarification. If the SP is told there aren't funds available to perform the investigation he/she should discuss with their Planner, Scheduler or Retail Item Manager to ensure the Funds Classification Reference Number or Program Control Number is correct.

3.1. The DR Originator shall process the exhibit(s) for locally generated DRs IAW TO 00-35D-54, paragraph 6.5.

3.2. OP shall process the exhibit(s) for locally generated DRs per instructions contained in TO 00-35D-54, paragraph 6.6 and shall ensure that any exhibit disposition instructions that are received are processed for shipment through the applicable Retail Item Manager or are forwarded to the exhibit holding activity if a change of condition is required.

3.3. RAFB Receiving and Storage Activity (DLA) shall:

3.3.1. Be responsible for storage and control of DR exhibits while in DLA possession in accordance with the TO 00-35D-54. Ensure no package or container is opened without the presence of a government Quality Assurance Representative (QAR) or SPOCO representative.

3.3.2. Central Receiving shall induct incoming DR exhibits (condition code "Q") and process to the appropriate exhibit holding facility for either "unclassified" or "classified" exhibits. Additionally during the induction, the RCN shall be placed in the "Lot Number" field in DSS. This shall be accomplished within 2 days for CAT I and 3 days for CAT II. If the RCN cannot be located the serial number of the exhibit will be input in its place

3.3.3. Central Receiving shall initiate an "Info only" WebSDR upon receipt of a Q condition exhibit.

3.4. The AP shall:

3.4.1. Monitor exhibit movement via JDRS database.

3.4.2. Request the status from the OP if exhibit release or shipment has not been confirmed within: Three calendar days for a CAT I DR exhibit, thirteen calendar days for a CAT II DR exhibit.

3.4.3. Request OP initiate tracer action if exhibit has not been received within 30 days of shipment.

3.4.4. When notified that an exhibit has been held by the exhibit holding activity for 30 days, provide disposition instructions or instruct the exhibit holding activity to extend the holding period.

3.4.5. At completion of the DR investigation, provide final exhibit disposition instructions to the support point. If the exhibit was not required and the DR closed, provide disposition instructions to the origination point.

3.5. The SP shall:

3.5.1. Schedule the exhibit for evaluation upon notification of exhibit receipt.

3.5.2. After exhibit evaluation, process the exhibit in accordance with AP instructions.

MITCHEL H BUTIKOFER, Colonel, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

TO 00-35D-54, USAF Deficiency Reporting, Investigating and Resolution, 1 November 2011

AFMAN 23-110, Basic USAF Supply Manual, 1 April 2009

DLAR 4155.24, Aircraft and Equipment Maintenance Management, 21 July 1993

AFMCI 63-510, Deficiency Reporting, Investigation and resolution, 2 May 2006

AFMCI 21-130, Depot Maintenance Materiel Control, 15 November 2007

Adopted forms

AF Form 847, Recommendation for Change of Publication

DD Form 1575, Suspended Tag-Materiel

DD Form 2332, Product Quality Deficiency Report Exhibit

Abbreviations and Acronyms

AF—Air Force

AFB—Air Force Base

AFMAN—Air Force Manual

AFRIMS—Air Force Records Information Management System

AIDR—Acceptance Inspection Deficiency Report

AP—Action Point

CAT I—Category I

CAT II—Category II

CE—Chief Engineer

CSI—Critical Safety Item

DCMA—Defense Contract Management Agency

DDWG—Defense Distribution Depot, Warner Robins, Georgia

DLA—Defense Logistics Agency

DR—Deficiency Report

DRI&R—Deficiency Reporting, Investigating and Resolution

DRUI—Deficiency Report Unique Identifier

DSS—Distribution Standard System

EI—Engineering Investigation

FMS—Foreign Military Sales

IAPI—Inter-Service application Programming Interface

JDRS—Joint Deficiency Reporting System

LRA—Last Rework Activity

MHAP—Mishap/High Accident Potential

MIP—Materiel Improvement Project

MIPRB—Materiel Improvement Project Review Board

MISTR—Management of Items Subject To Repair

NSN—National Stock Number

OP—Originating Point

OPR—Office of Primary Responsibility

OSS&E—Operational Safety, Suitability and Effectiveness

PM—Program Manager

PQDR—Product Quality Deficiency Report

QAR—Quality Assurance Representative

RCN—Report Control Number

RDS—Records Disposition Schedule

SAV—Staff Assistance Visit

SOS—Source of Supply

SP—Support Point

SPM—System Program Manager

SPOCO—Single Point of Contact Office

SSC—Shop Service Center

SSPM—Subsystem Program Manager

ST—Support Team

TCG—Technical Coordination Group

TCP—Technical Coordination Program

TCTO—Time Compliance Technical Order

T&E—Test and Evaluation

USAF—United States Air Force

WebSDR—Web Based Supply Deficiency Report

RAFB—Robins Air Force Base

WRALC—Warner Robins Air Logistics Complex

WSSC—Weapon System Support Center

Attachment 2

ROBINSAFB DEFICIENCY REPORTING FLOWCHART

A2.1. The following 5 pages contain the RAFB Deficiency Reporting Flowchart. The flowchart contains processes for Originators, Originating Points, Screening Points, Action Points, Support Points and MIP Review Board members.

Figure A2.1. Deficiency Reporting Process (Part 1)

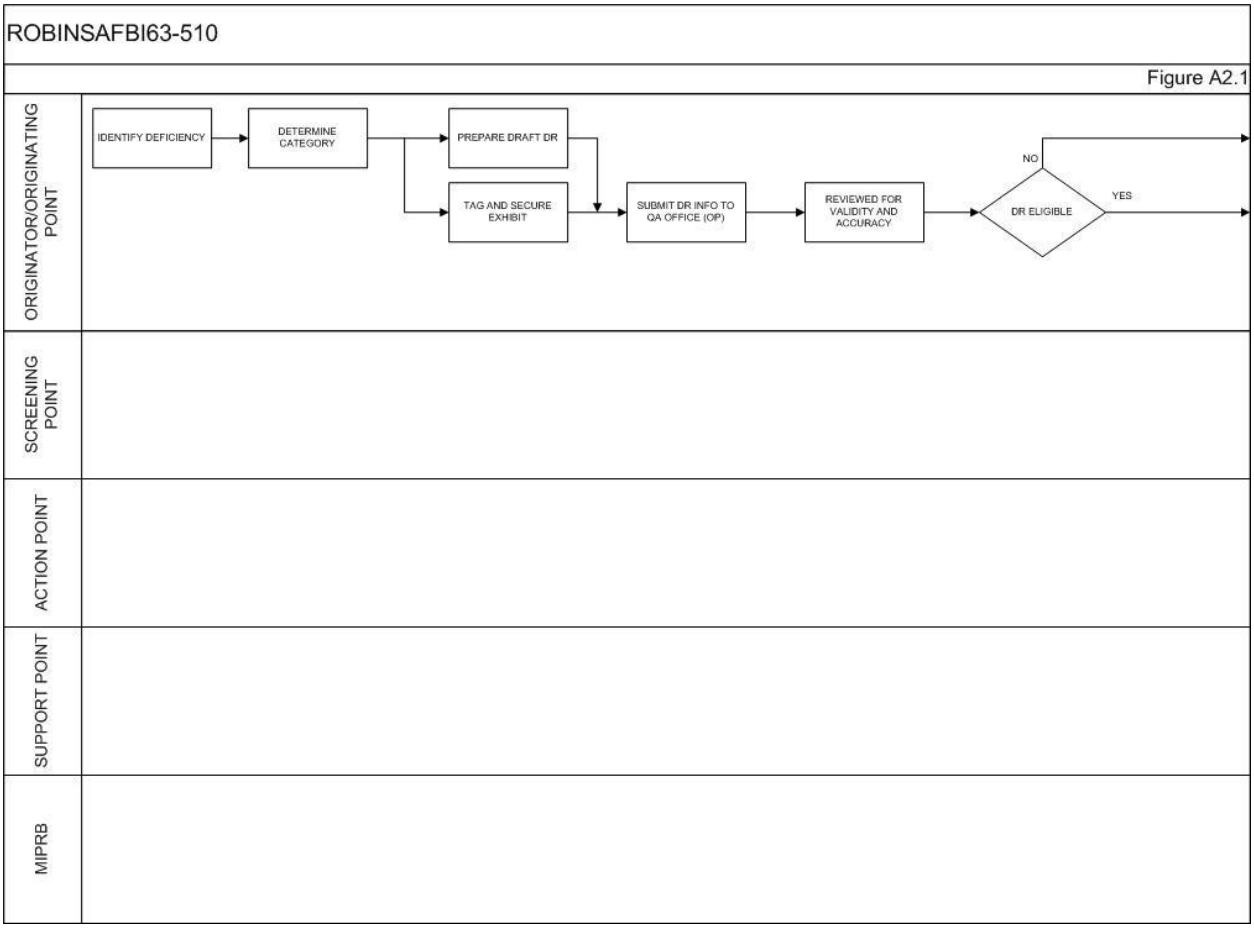

Figure A2.2. Deficiency Reporting Process (Part 2)

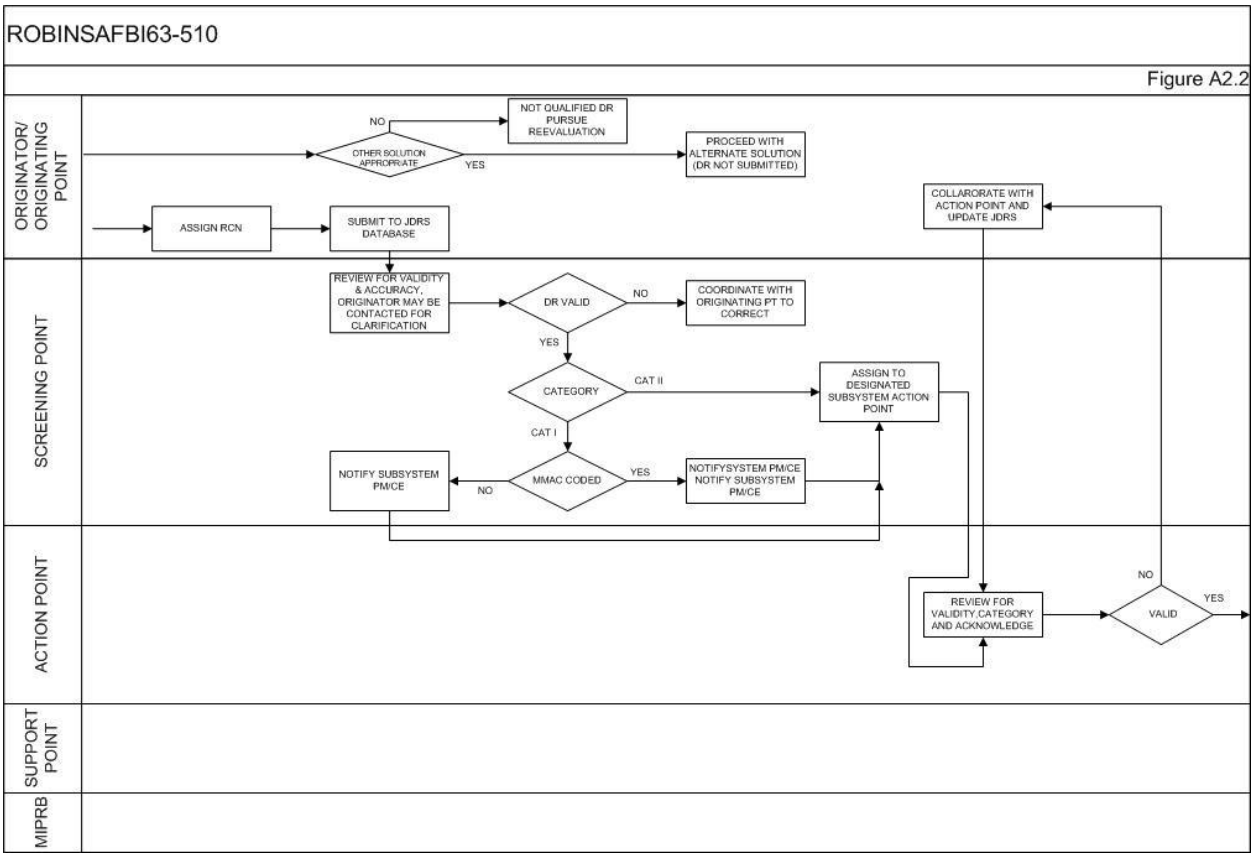

Figure A2.3. Deficiency Reporting Process (Part 3)

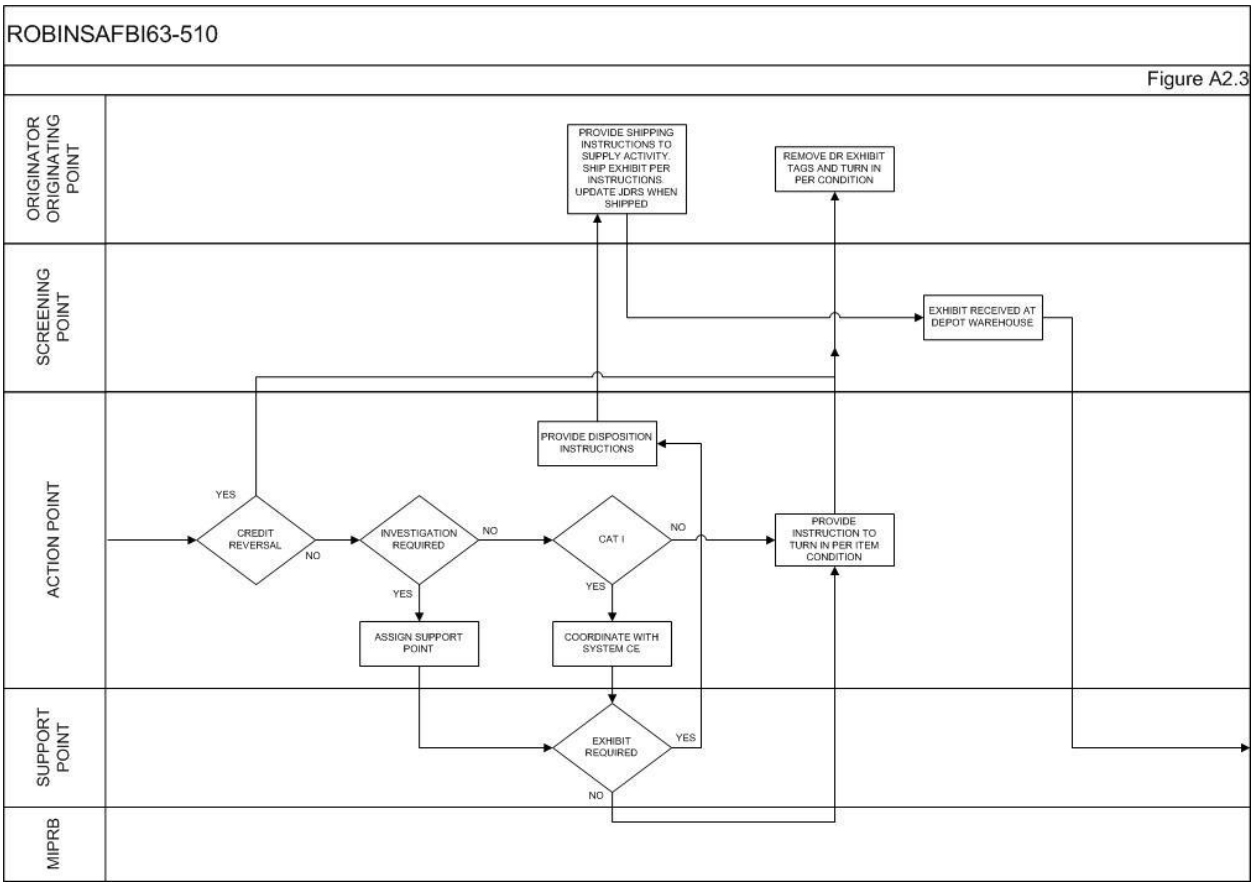

Figure A2.4. Deficiency Reporting Process (Part 4)

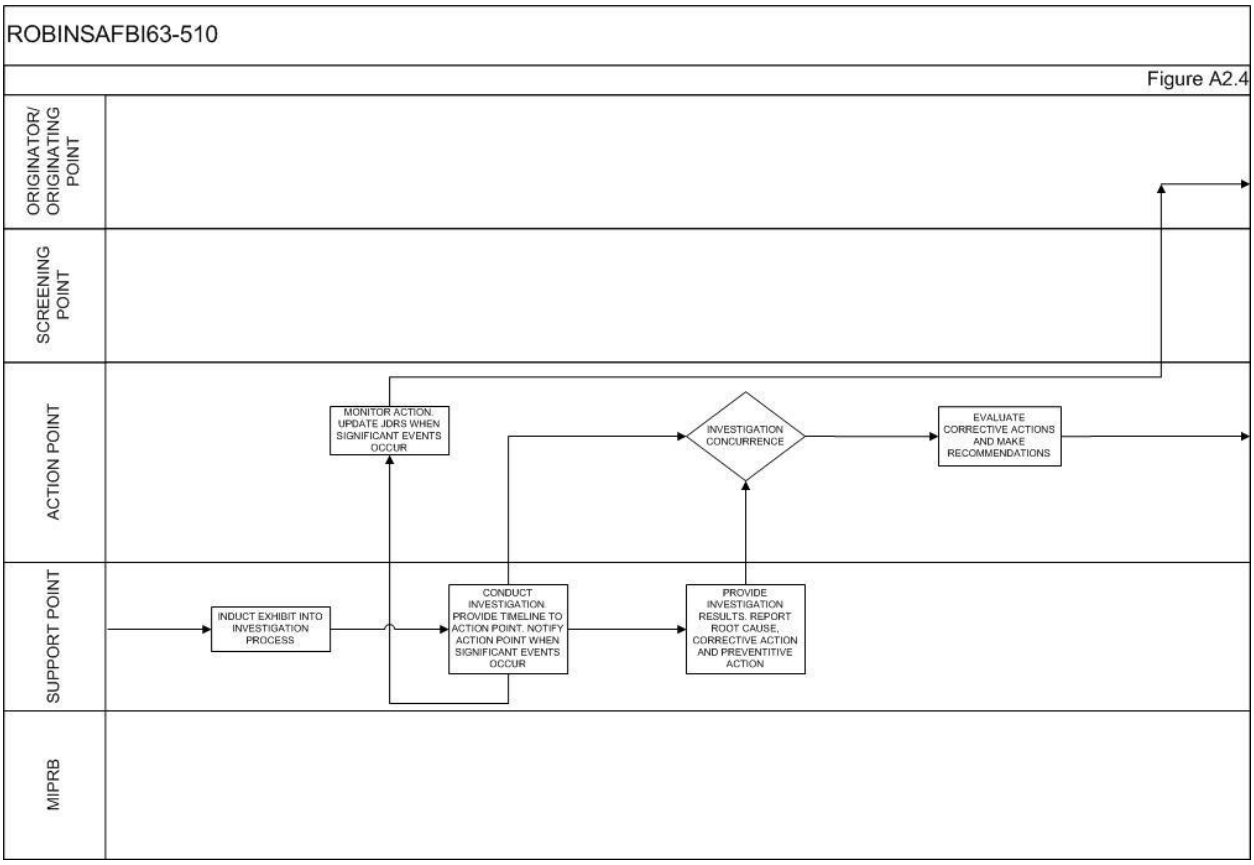

Figure A2.5. Deficiency Reporting Process (Part 5)