



FAA REPAIR STATION # OMXR603L-EASA.145.5102

Valued Customer,

It is the PHS/MWA Aviation Services policy to respond in a timely fashion to every regulatory and quality inquiry presented by our current and prospective customers, in particular quality surveys. Our company receives daily requests for this information. Maintaining our customer service commitment in this area involves a significant amount of resources from our staff.

In an effort to expedite our response to our customers' requests, while at the same time remain efficient and competitive, we have developed our own standard supplier audit/survey. The supplier audit/survey contains information that is generally requested in the industry from many sources and is continually updated whenever a need may be warranted.

We ask you in the most respectful way to please accept our supplier audit/survey in lieu of your own form for the reasons presented above. Should you need additional information that is not contained in our supplier audit/survey, we will be happy to provide it.

If you need any additional information or have any questions, please contact me directly.

Steve Flowers
Corporate Quality Manager
Tel: (951) 695-1008 ext 127
Fax: (951) 297-6446
steve.flowers@phsmwa.com

SUPPLIER AUDIT/SURVEY

1. General

Company Name: **PHS/MWA Aviation Services**

Address: 42355 Rio Nedo

City: Temecula State: California

Country: USA ZIP Code: 92590

Telephone Number: 951-695-1008 Fax Number: 951-695-1006

Website: www.phsmwa.com

Type of Company: Repair Station Years in Business: In business since 1967

CAGE Code: 086H1 DUNS: 62-246-9815

Facilities: Own: Lease: Area: 61,560 sq. ft. Building Type: CTS Buildings

Repair/Overhaul Services: Cargo Systems, Hydraulics, Galley Inserts, Electrical, Electro-Mechanical, Waste Systems

Manufacturing: Motors, Stators, Piece Parts

Special Services: Engineering, Inspection, NDT, Stator Rewind, Dynamic Balancing, Machining

Total Employees: 91

- Production: 53 - Supervision: 14 - Engineering: 4
- Inspection: 5 - Quality Assurance: 2

General Manager: Barry Bale Tel: 951-695-1008 Fax: 951-695-0863
Email: barry.bale@phsmwa.com

Quality Manager: Steve Flowers Tel: 951-695-1008 Fax: 951-297-6446
Email: steve.flowers@phsmwa.com

Customer Service: Craig Bale Tel: 951-695-1008 Fax: 951-695-0863
Email: craig.bale@phsmwa.com

Accounting: Mary Beth Bale Tel: 951-695-1008 Fax: 951-695-0863
Email: Marybeth.Bale@phsmwa.com

SUPPLIER AUDIT/SURVEY

Approvals held from Airworthiness Authorities; Example Repair Station Certificate, PMA Approvals

Authority	Reference Number	Rating	Expiry Date
FAA	OMXR603L	Accessory	N/A
E.A.S.A.	EASA145.5102		August 1, 2011
FAA	PQ2560NM	PMA Approvals	N/A

2. Certification

YES NO N/A

- | | | | |
|---|-------------------------------------|--------------------------|-------------------------------------|
| A. Does the vendor hold a current FAA Air Agency Certificate? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Are all required certificates, operations specifications, licenses, repairman certificates and registrations available for review? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. If the repair station has "Limited Ratings," does the vendor have a capabilities listing accepted by the FAA? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| D. Does the vendor have an FAA approved and active anti-drug and alcohol misuse prevention program? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Does the vendor have a procedure to: | | | |
| 1. Ensure that their U.S. based sub-contracted maintenance/preventive maintenance providers, at all tiers (certificated and non-certificated), are actively participating in a U.S. Department of Transportation anti-drug and alcohol misuse prevention program? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Obtain and subsequently retain, for a minimum of three (3) years from date of work, proof of antidrug and alcohol misuse prevention program compliance for each subcontract maintenance provider at all tiers at which work is performed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3. Quality Programs

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| A. Does the vendor have a Quality Control Manual that includes: | | | |
| 1. Descriptions of the systems and procedures used for: | | | |
| a) Inspecting incoming raw material to ensure acceptable quality? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Performing preliminary inspections of all articles that are maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Inspecting all articles that have been involved in an accident for hidden damage before maintenance, preventive maintenance or alteration is performed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Establishing and maintaining proficiency of inspection personnel? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e) Establishing and maintaining current technical data for maintaining articles? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f) Qualifying and surveying non-certificated persons who perform maintenance, preventive maintenance or alterations for the repair station? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g) Performing final inspection and return-to-service of maintained articles? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h) Calibrating measuring and test equipment used to maintain articles, including the intervals at which the equipment will be calibrated? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i) Taking corrective action on deficiencies? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j) Revising the Quality Control Manual? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SUPPLIER AUDIT/SURVEY

3. Quality Programs (continued)

YES NO N/A

- | | | | |
|---|-------------------------------------|--------------------------|-------------------------------------|
| 2. References, where applicable, to manufacturer’s inspection standards? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Samples of and instructions for completing maintenance and inspection forms, or reference to a separate forms manual? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Is the Quality Control Manual current? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Does the vendor’s program include procedures for controlling shelf life? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Does the vendor’s program include procedures for controlling scrapped parts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Does the vendor have a Repair Station Manual (RSM) that contains the following: | | | |
| 1. The vendor’s organizational structure including: | | | |
| a) Each management position with authority to act on behalf of the repair station? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b) The area of responsibility assigned to each management position? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Duties, responsibilities, and authority of each management position? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d) An organizational chart? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Procedures for maintaining the roster(s)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. A description of the vendor’s operations, including housing, facilities, equipment and materials? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Procedures for: | | | |
| a) Revising the capabilities list and notifying the CHDO of revisions to the list? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b) Performing self evaluation the capabilities list? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Procedures for revising the training program and submitting revisions to the CHDO for approval? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Procedures to govern work performed at another location? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Procedures for maintenance, preventive maintenance, alterations, and inspections performed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Procedures for maintaining and revising contract maintenance information, and notifying the FAA? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. A description of the record-keeping system? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Procedures for revising the RSM and notifying the FAA? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. A description of the system used control sections of the RSM? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Is the RSM current and available to employees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Does the vendor have an internal audit and surveillance function? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. Does the internal audit function ensure compliance with customer specifications? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Does the internal audit program assure appropriate corrective action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Does the vendor maintain, for a minimum of three (3) years, a file of audit findings and corrective actions from audits for which a VEL was signed? Is the file accessible to the auditor? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SUPPLIER AUDIT/SURVEY

3. Quality Programs (continued)

YES NO N/A

- K. Does the vendor maintain a list of sub-contracted maintenance functions and agencies which includes type of certificate and rating(s), if any, held by each agency? YES NO N/A
- L. Does the vendor ensure that sub-contractor quality meets customer specifications and legal requirements? YES NO N/A
- M. Does the vendor maintain certification on subcontractor work? YES NO N/A
- N. Does the vendor have a contract allowing FAA to inspect non-certificated subcontractors? YES NO N/A
- O. Does the vendor have a procedure for reporting defects or un-airworthy conditions to the customer and the FAA? YES NO N/A

4. Inspection Programs

- A. Does the vendor perform any required inspections (RII) for any customer? YES NO N/A
- B. Are RII inspectors properly trained and certified? YES NO N/A
- C. Is there proper separation of maintenance and inspection responsibilities for vendors that perform required inspections? YES NO N/A
- D. Does the vendor have an acceptable receiving inspection system? YES NO N/A
- E. Are sampling procedures used to ensure quality? YES NO N/A
- F. Does the vendor have an acceptable system for controlling stamps for both inspection and production personnel? YES NO N/A

5. Personnel

- A. Has the vendor designated an employee as the "Accountable Manager"? YES NO N/A
- B. Does the vendor have a minimum of three (3) employees? YES NO N/A
- C. Does the roster(s) identify all management, supervisory and inspection personnel? YES NO N/A
- D. Does the roster(s) identify all personnel authorized for return-to-service? YES NO N/A
- E. Does the repair station have an employment summary for all personnel listed on the repair station roster(s)? YES NO N/A
- F. Do the vendor's supervisory personnel satisfy the requirements of the F.A.R.s and the CASE 1-A standard? YES NO N/A
- G. Do the vendor's inspection personnel satisfy the requirements of these requirements and standard? YES NO N/A
- H. Do the vendor's return-to-service personnel satisfy the requirements of these requirements and standard? YES NO N/A
- I. Are specific individuals, by title, responsible for the following programs:
 - 1. Technical Data? YES NO N/A
 - 2. Shelf Life? YES NO N/A
 - 3. Calibrated tooling? YES NO N/A
 - 4. Scrap parts? YES NO N/A

SUPPLIER AUDIT/SURVEY

5. Personnel (continued)

YES NO N/A

J. Is there a back-up person identified, by title, for all programs listed in 5.I. of this checklist?

6. Technical Data Program

A. Does the vendor have the required shop manuals and specifications to perform the repair/overhaul in accordance with customer specifications?

B. Are there established approved procedures controlling revisions in manuals deviating from OEM specifications (e.g. EO, EA, air carrier data, etc.)?

C. Does the vendor have a documented system to ensure technical data is current?

D. Does the vendor have records of manual revisions?

E. Are manual revisions up to date?

F. Is the technical data properly identified and available to mechanics?

G. Does the vendor have a system to control working copies of manuals to ensure they are revised with the masters?

H. Is technical data stored in a manner that will protect it from dirt and damage?

I. Are adequate viewing devices in good condition and available for viewing the technical data?

J. If the vendor has SFAR 36 authority, does it have a system for receiving customer approval prior to use of the data?

K. Does the vendor have an approved SFAR-36 manual and roster?

7. Shelf Life Program

A. Does the vendor have a documented shelf life program?

B. Does the program list parts and materials that have shelf life limits?

C. Does each shelf life item have the shelf life expiration limit displayed?

D. Is there an adequate system to assure that no item will be issued or used past its expiration date?

8. Calibration Program

A. Does the vendor have a documented calibration program?

B. Is each item requiring calibration identified and on the calibration list?

C. Are standards used to calibrate each item acceptable to the FAA (e.g. The National Institute of Standards and Technology (NIST))?

D. Is there a system to identify each item in the program, its calibration frequency, and its calibration due date?

E. Does the vendor have a procedure for identifying, controlling and/or preventing use of out-of-service and due-for calibration tools and equipment?

F. Does the vendor have a procedure to control the calibration of personal tools?

G. Did a sample check of the calibrated items indicate that it is within calibration limits?

SUPPLIER AUDIT/SURVEY

8. Calibration Program (continued)

YES NO N/A

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| H. Are the tools and test equipment in a serviceable condition? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Do calibration records: | | | |
| 1. Show date calibrated? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Show calibration due date? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Identify individual or vendor that performed calibration or check? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Contain a calibration certificate for each item calibrated by an outside agency? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Record details of adjustments and repairs? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Show the P/N, S/N, and calibration due date of the standard used to perform the calibration? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

9. Training Program

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| A. Does the vendor have a documented training program? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Does the training program include all mechanics, inspectors and technical supervisors? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Are mechanics, inspectors and supervisors properly trained, authorized and certificated, if required, for the work they perform? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Is formal and OJT training documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Are training records for mechanics, inspectors and supervisors retained for a minimum of two (2) years after the person leaves the company? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

10. Housing and Facilities

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| A. If the vendor deals in non-aircraft parts, materials and/or maintenance activities, are they adequately segregated from the aircraft functions? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Does the vendor have: | | | |
| 1. Sufficient work space and areas for the proper segregation and protection of articles? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Segregated work areas enabling environmentally hazardous or sensitive operations such as painting, cleaning, welding, avionics work, and machining to be done properly and in a manner that does not adversely affect other maintenance? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Suitable racks, hoists, trays, stands, and other segregation means for the storage and protection of all articles? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Space sufficient to segregate articles and materials stocked for installation from those undergoing maintenance, preventive maintenance, or alterations? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Ventilation, lighting, and control of temperature, humidity, and other climatic conditions sufficient to ensure personnel perform maintenance, preventive maintenance, or alterations to the standards required by the part? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Areas for receiving and for shipping customers' units with adequate space, lighting shelving, security, and fire protection to accommodate customers' units in a manner that will preclude damage, loss, and theft? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Adequate and appropriate storage area to safely store customers' reusable shipping containers and to protect them from environmental damage? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SUPPLIER AUDIT/SURVEY

10. Housing and Facilities (continued)

YES NO N/A

- C. If the vendor has an airframe rating, is suitable permanent housing provided to enclose the largest type and model of aircraft listed on its Operations Specifications? YES NO N/A
- D. If the vendor performs maintenance, preventive maintenance, or alterations on articles outside of its housing, does it provide suitable facilities that are acceptable to the FAA and its customers? YES NO N/A
- E. Do facilities outside of the vendor’s housing meet the requirements of this standard so that the work can be done in accordance with the requirements of 14 CFR 43? YES NO N/A

11. Work Processing

- A. Does the vendor observe duty time limitations? YES NO N/A
- B. Does the vendor only perform work for which it is authorized on its Operations specifications? YES NO N/A
- C. Does the vendor have adequate tooling and test equipment to perform the work? YES NO N/A
- D. Where a vendor uses specified OEM test equipment and/or test equipment other than that specified by the OEM, does that vendor:
 - 1. Have operating and maintenance manuals for the equipment? YES NO N/A
 - 2. Perform maintenance and servicing per the manuals? YES NO N/A
 - 3. Maintain maintenance and servicing minimum of two (2) years? YES NO N/A
 - 4. List the equipment, where applicable, in their calibration program? YES NO N/A
- E. Where a vendor uses non-OEM specified equipment, is the equipment properly certified? YES NO N/A
- F. Are adequate tools and current manuals available or at the mechanics’ work stations? YES NO N/A
- G. Are customers’ parts properly identified throughout the maintenance actions and in storage? YES NO N/A
- H. Is there a work turnover procedure used? YES NO N/A
- I. Does the shop segregate serviceable from unserviceable components? YES NO N/A
- J. Does the facility provide adequate protection of parts in work (e.g. filtered air or clean room (depending on type of part))? YES NO N/A
- K. Does the vendor have segregated work areas enabling environmentally hazardous or sensitive operations such as painting, cleaning, welding, avionics work and machining to be done properly and in a manner that does not adversely affect other maintenance? YES NO N/A
- L. Does the vendor have procedures to obtain customer specifications, incorporate those specifications into their work processes, verify that specifications were incorporated, and obtain approval for deviating, if necessary, from those specifications, and are there adequate checks, inspections, and tests to ensure work was performed to those specifications? YES NO N/A
- M. Are smoking, eating and drinking forbidden in the work area or does the vendor have a written program to ensure units are protected from contamination? YES NO N/A
- N. Are fluid dispensing cans and servicing units properly identified? YES NO N/A
- O. Are the vendor’s work records complete, in order, and legible? YES NO N/A

SUPPLIER AUDIT/SURVEY

11. Work Processing (continued)

YES NO N/A

- P. Do the records contain:
- 1. The description of the work performed or reference to data, including revision level, acceptable to the administrator?
 - 2. The date of completion of the work performed?
 - 3. The name of the person performing the work?
 - 4. The name of the person inspecting the work?
 - 5. The signature, certificate number of the person returning the article to service?
- Q. Are all test and inspection records in work package?
- R. Does the vendor’s return-to-service document meet customer and FAA requirements?
- S. Does the vendor’s record keeping system and retention time meet 14 CFR requirements?

12. Storage

- A. Are parts and materials correctly identified and properly stored?
- B. Do parts in bins match part number on bins?
- C. Does the vendor have a quarantine area for rejected parts and materials waiting disposition?
- D. Are parts and material properly protected from damage and deterioration?
- E. Are flammable, toxic or volatile materials properly identified and stored?
- F. Are sensitive parts and equipment (oxygen parts, o’rings, electrostatic sensitive devices, etc.) properly packaged, identified and stored to protect from damage and contamination?
- G. Are high pressure bottles correctly labeled, properly stored and secured?
- H. Does the vendor maintain traceability certification on all parts and raw materials?

13. Scrapped Parts Program

- A. Does the vendor have a documented procedure for controlling scrapped parts?
- B. Does the scrap program assure that the scrapped parts are either returned to the customer or mutilated beyond repair?
- C. Does the scrap program require a record of scrapped life limited parts to be maintained for a minimum of two (2) years?
- 1. Does the record include the P/N, S/N, and date of the scrapped part?

14. Shipping

- A. Are components returned in an appropriate shipping container or as specified by the customer?
- B. Does the vendor verify that the identifying data (P/N, S/N, nomenclature, mod. no.) on the documentation and the data plate match?

SUPPLIER AUDIT/SURVEY

15. Safety / Security / Fire Protection

YES NO N/A

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| A. Does the vendor provide adequate security for customer parts in its possession? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Is the security system reviewed periodically by management or an outside vendor? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Are fire protection devices inspected periodically? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Are fire stations identified and extinguishers in serviceable condition? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Are fire lanes, doors and fire extinguishers clear of obstruction? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Are safety guards in place on power equipment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Are the vendor's shop operations conducted in a safe manner and environment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I certify to the best of my knowledge the information supplied is accurate, complete, and current.

Steve Flowers

**Steve Flowers
Corporate Quality Manager**

July 05, 2011

Dated

UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

Air Agency Certificate

Number OMXR603L

This certificate is issued to

PHS/MWA

DBA

PHS/MWA AVIATION SERVICES

whose business address is

42355 RIO NEDO

TEMECULA, CA. 92590

upon finding that its organization complies in all respects with the requirements of the Federal Aviation Regulations relating to the establishment of an Air Agency, and is empowered to operate an approved REPAIR STATION

with the following ratings:

ACCESSORY (12/31/97)

This certificate, unless canceled, suspended, or revoked, shall continue in effect INDEFINITELY

Date issued:

SEPTEMBER 4, 1992

By direction of the Administrator

BRUCE E. ALLEN, MANAGER
RAL FLT. Standards District Office

This Certificate is not Transferable, AND ANY MAJOR CHANGE IN THE BASIC FACILITIES, OR IN THE LOCATION THEREOF, SHALL BE IMMEDIATELY REPORTED TO THE APPROPRIATE REGIONAL OFFICE OF THE FEDERAL AVIATION ADMINISTRATION

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both

Table of Contents

Part A

	HQ CONTROL DATE	EFFECTIVE DATE	AMENDMENT NUMBER
001 Issuance and Applicability	02/23/2011	03/11/2011	6
002 Definitions and Abbreviations	11/15/2010	03/11/2011	4
003 Ratings and Limitations	01/30/2004	03/11/2011	4
004 Summary of Special Authorizations and Limitations	09/23/1998	06/16/2011	5
007 Designated Persons	12/19/2006	03/11/2011	4
025 Electronic/Digital Recordkeeping System, Electronic/Digital Signature, and Electronic Media	11/16/2004	06/16/2011	0
101 Additional Fixed Locations	11/16/2004	03/30/2011	0
449 Antidrug and Alcohol Misuse Prevention Program	07/17/2009	03/18/2011	1

A001 . Issuance and Applicability

HQ Control: 02/23/2011

HQ Revision: 05a

a. These operations specifications are issued to PHS/MWA, a Domestic Repair Station, pursuant to Title 14 Code of Federal Regulations (CFR) Section 145.53. The repair station certificate holder shall conduct operations in accordance with CFR Part 145 and these operations specifications.

The certificate holder's address:

Fixed Location:
42355 Rio Nedo
Temecula, California 92590

b. The holder of these operations specifications is the holder of Certificate Number OMXR603L and shall hereafter be referred to as the certificate holder.

c. These operations specifications are issued as part of this Repair Station Certificate, and are in effect as of the Date Approval is effective. This certificate and operations specifications shall remain in effect until , unless sooner surrendered, suspended, or revoked.

d. The repair station specified on these operations specifications and located within the domestic United States performs maintenance and/or alteration of aircraft and/or aeronautical products to be installed on aircraft under the terms and conditions of a Bilateral Aviation Safety Agreement and associated Maintenance Implementation Procedures between the Federal Aviation Administration and a Foreign National Aviation Authority identified in the Interim BASA/MIP Guidance.

e. The certificate holder is authorized to conduct the operations described in subparagraph a under the following other business names:

PHS/MWA Aviation Services

Delegated authorities: None

A002 . Definitions and Abbreviations

HQ Control: 11/15/2010

HQ Revision: 05a

Unless otherwise defined in these operations specifications, all words, phrases, definitions, and abbreviations have identical meanings to those used in the Title 14 Code of Federal Regulations (CFR) Regulations and Title 49 United States Code as cited in Public Law 103-272, as amended. Additionally, the definitions listed below are applicable to operations conducted in accordance with these operations specifications.

**Bilateral Aviation
Safety Agreement
(BASA)**

An executive agreement concluded between the United States and a foreign country for the purpose of promoting aviation safety; also known as an Agreement for the Promotion of Aviation Safety.

Certificate Holder

In these operations specifications the term "certificate holder" shall mean the holder of the repair station certificate described in these operations specifications in Part A paragraph A001 and any of its officers, employees, or agents used in the conduct of operations under this certificate.

CFR

Code of Federal Regulations

Class rating

As used with respect to the certification, ratings, privileges, and limitation of aircraft within a category having similar operating characteristics.

**Domestic Repair
Station**

A certificated repair station located in the United States.

Exemption

An authorization that permits an alternate means of compliance with a specific CFR. The exemption must meet the procedural requirements of CFR 14, Part 11.

**FAA Accountable
Manager**

A person designated by the certificated repair station who is responsible for and has authority over all repair station operations that are conducted under 14 CFR Part 145, including ensuring that the repair station's personnel follow the regulations and serving as the primary contact with the FAA.

FAA Form 8000-4-1

The FAA Form 8000-4-1 has been replaced with the form contained within this operations specifications application (OPSS) for the generation of the 14 CFR Part 145 Repair Station Operations Specifications.

**Foreign Repair
Station**

A certificated repair station located outside of the United States.

**Geographic
Authorization**

An approval provided to a foreign repair station to perform maintenance support under contract for a U.S. air carrier, or operator of U.S. - registered aircraft under 14 CFR Part 129, at a location other

than the repair station facility. A geographic authorization is issued by the FAA to respond to the need of a U.S. air carrier or Part 129 foreign operator for maintenance at a station where the frequency and scope of that maintenance does not warrant permanently staffing and equipping the station for its accomplishment.

EASA

European Aviation Safety Agency

**EASA Accountable
Manager**

The manager who has corporate authority for ensuring that all maintenance required by the customer can be financed and carried out to the standard required by the EASA full member Authority.

Limited Rating

Rating issued to repair stations for the performance of maintenance on particular makes and models of airframes, powerplants, propellers, radios, instruments, accessories, and/or parts.

**Limited Ratings -
Specialized Services**

Rating issued for a special maintenance function when the function is performed in accordance with a specification or data acceptable to the Administrator.

Line Maintenance

Any unscheduled maintenance resulting from unforeseen events; or scheduled checks where certain servicing and/or inspections do not require specialized training, equipment, or facilities.

Maintenance

The inspection, overhaul, repair, preservation, and the replacement of parts, but excludes preventive maintenance.

**Maintenance
Implementation
Procedures (MIP)**

Procedures for implementing the provisions of a BASA that apply to maintenance.

MOE

Maintenance Organization Exposition - Pertains to European Aviation Safety Agency member countries that use an MOE in place of a Repair Station Manual and a Quality Control Manual.

**Preventive
Maintenance**

As defined in Appendix A subparagraph (c) of 14 CFR Part 43.

QCM

Quality Control Manual

RSM

Repair Station Manual

1. Issued by the Federal Aviation Administration .
2. Support information reference:
3. These Operations Specifications are approved by direction of the Administrator.



2011.03.10 12:45:49 Central Standard Time
Location: WebOPSS
Digitally signed by John P Schaper,
Principal Maintenance Inspector (WP21)

4. Date Approval is effective: 03/11/2011 Amendment Number: 4
5. I hereby accept and receive the Operations Specifications in this paragraph.

Bale, Barry R., General Manager

Handwritten signature of Barry R. Bale in black ink.

Date: 03/11/2011

A003 . Ratings and Limitations

HQ Control: 01/30/2004

HQ Revision: 010

The Certificate Holder is authorized the following Ratings and/or Limitations:

Class Ratings

Accessory Class 1: Mechanical Accessories

Accessory Class 2: Electrical Accessories

Note: The Certificate Holder is authorized use of the following Process Specification (As Revised) during the repair and or overhaul of Class 1 or Class 2 Accessories:

P.S. 1.101, Baseline Engineering.P.S.

1.102, Brasing copper wire/stranded lead wire.P.S.

1.103, High Potential Testing.P.S.

1.104, Impregnation of Stators.P.S.

1.105, Stator burn out procedure.P.S.

1.107, Stator stack bonding.P.S.

1.108, Mod 957C853 to R910C106-1.P.S.

1.109, Repair motor rotor P/N 965C249-1

Fabrication/Inspection of electrical wiring harness assemblies - All make and models.

Limited Ratings

Rating

Manufacturer

Make/Model

Limitations

None Authorized

Limited Ratings - Specialized Services

Rating

Specifications

Limitations

None Authorized.

1. Issued by the Federal Aviation Administration .
2. Support information reference:
3. These Operations Specifications are approved by direction of the Administrator.



2011.03.10 12:45:53 Central Standard Time
Location: WebOPSS
Digitally signed by John P Schaper,
Principal Maintenance Inspector (WP21)

4. Date Approval is effective: 03/11/2011 Amendment Number: 4
5. I hereby accept and receive the Operations Specifications in this paragraph.

Bale, Barry R., General Manager

Barry R. Bale

Date: 03/11/2011

A004 . Summary of Special Authorizations and Limitations

HQ Control: 09/23/1998

HQ Revision: 010

a. The certificate holder, in accordance with the reference paragraphs, is authorized to:

	Reference Paragraphs
Use an approved electronic recordkeeping system, electronic/digital signature, and/or electronic media.	A025
Perform work, including continuous operations, at additional locations other than at its primary fixed location.	A101
Conduct operations choosing to have an antidrug and alcohol misuse prevention program.	A449

b. The certificate holder is *not authorized* and *shall not*:

	Reference Paragraphs
Use Exemptions.	A005
Perform maintenance with NAA ratings where the scope of work is authorized by a BASA/MIP.	A060
Perform maintenance in accordance with foreign repair station geographic authorizations.	B050
Perform work, excluding continuous operations, at additional locations other than at its primary Fixed Location.	D100
Perform line maintenance for cert. holders conducting operations under Parts 121 and 135 and for foreign carriers/persons operating U.S. registered aircraft in common carriage under Part 129, apart from D100 which authorizes that work away from station.	D107

A007 . Designated Persons

HQ Control: 12/19/2006

HQ Revision: 030

a. The personnel listed in the following table are designated to officially apply for and receive operations specifications for the certificate holder indicated below.

Table 1 – Designated Persons to Apply for and Receive Authorizations

Title	Name	Parts Authorized
General Manager	Bale, Barry R.	A,D

b. The following personnel listed in Table 2 are designated by the certificate holder to receive Information for Operators (INFO) messages for the certificate holder as indicated below. A receipt for the information by an operator or person is not required.

Table 2 – Designated to Receive INFO Messages

Name	Email Address	Telephone No.	Type of Information to Receive
Bale, Barry R	barry.bale@phsmwa.com	951-440-2170	ALL

1. Issued by the Federal Aviation Administration .
2. Support information reference:
3. These Operations Specifications are approved by direction of the Administrator.



2011.03.10 12:45:59 Central Standard Time
Location: WebOPSS
Digitally signed by John P Schaper,
Principal Maintenance Inspector (WP21)

4. Date Approval is effective: 03/11/2011 Amendment Number: 4
5. I hereby accept and receive the Operations Specifications in this paragraph.

Bale, Barry R., General Manager

Date: 03/11/2011

Barry R. Bale

**A025 . Electronic/Digital Recordkeeping System,
Electronic/Digital Signature, and Electronic Media**

HQ Control: 11/16/2004

HQ Revision: 00a

- a. The certificate holder is authorized to use an approved electronic/digital recordkeeping system, described and/or referenced in this paragraph (if none, enter N/A.)

In accordance with the approved RSM/QCM procedure.

- b. The certificate holder is authorized the use of the following electronic/digital signature procedures (if none, enter "N/A").

N/A

- c. The certificate holder is authorized to use electronic media for the repair station and quality control manuals, if acceptable (if none, enter "N/A").

In accordance with the approved RSM/QCM procedures

-
1. Issued by the Federal Aviation Administration .
 2. Support information reference:
 3. These Operations Specifications are approved by direction of the Administrator.



2011.06.16 16:12:07 Central Daylight Time
Location: WebOPSS
Digitally signed by John P Schaper,
Principal Maintenance Inspector (WP21)

4. Date Approval is effective: 06/16/2011 Amendment Number: 0
5. I hereby accept and receive the Operations Specifications in this paragraph.

Bale, Barry R., General Manager

Date: 06/16/2011

A101 . Additional Fixed Locations

HQ Control: 11/16/2004

HQ Revision: 010

a. The certificate holder may perform work at the following additional fixed location(s) listed in Table I, provided it has the facilities, material, equipment and technical personnel to perform the work authorized :

Table 1

Additional Location Address(es)				
Address	City	State	Country	Postal Code
42374 Avenida Alvarado Ste. A	Temecula	California	UNITED STATES	92590

b. This authorizes the certificate holder to use multiple locations to perform its operations under a single certificate.

c. This authorization does not constitute a geographic authorization for work performed at another location.

d. The certificate holder may perform continuous operations at the facilities listed in Table I above.

e. Privileges of a line station, as set forth by any EASA line station rating, are authorized at these locations, as applicable.

f. All the authorizations and exemptions authorized for the certificate holder apply at these locations, as applicable.

NONE

A449 . Antidrug and Alcohol Misuse Prevention Program

HQ Control: 07/17/2009

HQ Revision: 00a

- a. The Part 145 repair station certificate holder has elected to implement an Antidrug and Alcohol Misuse Prevention Program, because the certificate holder performs safety-sensitive functions for a 14 CFR Part 121, and 135 certificate holder and/or for a 14 CFR Part 91 operator conducting operations under Section 91.147.
- b. The certificate holder certifies that it will comply with the requirements of 14 CFR Part 120 and 49 CFR Part 40 for its Antidrug and Alcohol Misuse Prevention Program.
- c. Antidrug and Alcohol Misuse Prevention Program records are maintained and available for inspection by the FAA's Drug Abatement Compliance and Enforcement Inspectors at the location listed in Table 1 below:

Table 1

Location & Telephone of Antidrug and Alcohol Misuse Prevention Program Records:	
Telephone Number:	A1 951-695-1008
Address:	42355 Rio Nedo
Address:	N/A
City:	Temecula
State:	CA
Zip code:	92590

d. Limitations and Provisions.

- (1) Antidrug and Alcohol Misuse Prevention Program inspections and enforcement activity will be conducted by the Drug Abatement Division. Questions regarding these programs should be directed to the Drug Abatement Division.
- (2) The certificate holder is responsible for updating this operations specification when any of the following changes occur:
 - (a) Location or phone number where the Antidrug and Alcohol Misuse Prevention Program Records are kept.
 - (b) If the certificate holder's number of safety-sensitive employees goes to 50 and above, or falls below 50 safety-sensitive employees.
- (3) The certificate holder with 50 or more employees performing a safety-sensitive function on January 1 of the calendar year must submit an annual report to the Drug Abatement Division of the FAA.
- (4) The certificate holder with fewer than 50 employees performing a safety-sensitive function on January 1 of any calendar year must submit an annual report upon request of the Administrator, as specified in the regulations.

The certificate holder has 50 or more safety-sensitive employees.



European Aviation Safety Agency

The Quality Manager

PHS/MWA

d/b/a PHS/MWA AVIATION SERVICES

42355 Rio Nedo

Temecula, California 92590

United States of America

Fax N°: 951 695 1006

Cologne, 27 June 2011

Ref. Letter: EASA D(2011)/L9b/Rev 1/EASA.145.5102/FAA.OMXR603L/53104

Subject: Renewal and change to EASA Part-145 approval EASA.145.5102

Dear Sir or Madam,

Following a positive recommendation from the FAA the European Aviation Safety Agency hereby accepts the changes and confirms the renewed validity of your EASA Part-145 approval until **01 August 2013**, subject to continued compliance with FAR 145 and the EASA special conditions as detailed in the Agreement between the United States of America and the European Community on Cooperation in the Regulation of Civil Aviation Safety and associated Maintenance Annex Guidance (MAG):

PHS/MWA

d/b/a PHS/MWA AVIATION SERVICES

EASA Part-145 Approval certificate reference number:

EASA.145.5102

Please find enclosed your amended certificate. This certificate supersedes your EASA.145.5102 approval certificate dated 12 July 2006 which should be returned to the Agency at the following address:

EASA (European Aviation Safety Agency)

Postfach 10 12 53

50452 Köln

GERMANY

You are reminded that you will be required to submit your next renewal paperwork package in accordance with the MAG available on our web site at <http://www.easa.europa.eu>.

Yours faithfully,

Wilfried SCHULZE

Head of Organisations



U.S. APPROVAL CERTIFICATE

EASA.145.5102

Taking into account the provisions of Article 12 of Regulation (EC) 216/2008 of the European Parliament and of the Council and the bilateral agreement currently in force between the European Community and the Government of the United States of America, the European Aviation Safety Agency (EASA) hereby certifies:

PHS/MWA
d/b/a PHS/MWA AVIATION SERVICES

FAA NUMBER: OMXR603L
42355 Rio Nedo
Temecula, California 92590
United States of America

as a Part-145 maintenance organization approved to maintain the products listed in the FAA Air Agency Certificate and associated Operations Specifications and issue related certificates of release to service using the above reference, subject to the following conditions:

1. The scope of the approval is limited to that specified on the 14 CFR part 145 repair station Air Agency Certificate, and the associated Operations Specifications for work carried out in the United States (unless otherwise agreed in a particular case by EASA).
2. The approval scope shall not exceed the permitted EASA Part-145 ratings as detailed in Regulation EC (No) 2042/2003.
3. This approval requires continued compliance with 14 CFR part 145 and the differences as specified in the Maintenance Implementation Procedures, including the use of the FAA Form 8130-3 for release/return to service of components up to and including power plants.
4. Certificates of return to service must quote the EASA Part-145 approval reference number quoted above and the 14 CFR part 145 Air Agency Certificate number.
5. Subject to compliance with the foregoing conditions, this approval shall remain valid until:

01 August 2013

unless the approval is surrendered, superseded, suspended or revoked.

Date of issue: **22 June 2011**

Signed

For EASA

A449 . Antidrug and Alcohol Misuse Prevention Program

HQ Control: 07/17/2009

HQ Revision: 00a

- a. The Part 145 repair station certificate holder has elected to implement an Antidrug and Alcohol Misuse Prevention Program, because the certificate holder performs safety-sensitive functions for a 14 CFR Part 121, and 135 certificate holder and/or for a 14 CFR Part 91 operator conducting operations under Section 91.147.
- b. The certificate holder certifies that it will comply with the requirements of 14 CFR Part 120 and 49 CFR Part 40 for its Antidrug and Alcohol Misuse Prevention Program.
- c. Antidrug and Alcohol Misuse Prevention Program records are maintained and available for inspection by the FAA's Drug Abatement Compliance and Enforcement Inspectors at the location listed in Table 1 below:

Table 1

Location & Telephone of Antidrug and Alcohol Misuse Prevention Program Records:	
Telephone Number:	A1 951-695-1008
Address:	42355 Rio Nedo
Address:	N/A
City:	Temecula
State:	CA
Zip code:	92590

d. Limitations and Provisions.

- (1) Antidrug and Alcohol Misuse Prevention Program inspections and enforcement activity will be conducted by the Drug Abatement Division. Questions regarding these programs should be directed to the Drug Abatement Division.
- (2) The certificate holder is responsible for updating this operations specification when any of the following changes occur:
 - (a) Location or phone number where the Antidrug and Alcohol Misuse Prevention Program Records are kept.
 - (b) If the certificate holder's number of safety-sensitive employees goes to 50 and above, or falls below 50 safety-sensitive employees.
- (3) The certificate holder with 50 or more employees performing a safety-sensitive function on January 1 of the calendar year must submit an annual report to the Drug Abatement Division of the FAA.
- (4) The certificate holder with fewer than 50 employees performing a safety-sensitive function on January 1 of any calendar year must submit an annual report upon request of the Administrator, as specified in the regulations.

The certificate holder has 50 or more safety-sensitive employees.

1. Issued by the Federal Aviation Administration .
2. Support information reference:
3. These Operations Specifications are approved by direction of the Administrator.



2011.03.18 11:42:34 Central Daylight Time
Location: WebOPSS
Digitally signed by John P Schaper,
Principal Maintenance Inspector (WP21)

4. Date Approval is effective: 03/18/2011 Amendment Number: 1
5. I hereby accept and receive the Operations Specifications in this paragraph.

Bale, Barry R., General Manager

Barry R. Bale

Date: 03/18/2011
