



**GENERAL DYNAMICS LAND SYSTEMS  
SUPPLY CHAIN MANAGEMENT  
SOURCE INSPECTION REQUEST FORM (EQD2A)**



**Date:**

**Supplier Name:**

**Supplier Number (VCN) From PO:**

**Part Number:**

**PO Number:**

**Supplier Point of Contact:**

**Phone Number:**

**E-Mail Address:**

**Date Inspection/Audit Required (allow 5 days for scheduling):**

**Comments:**

**Fill out the above request and submit for processing to your Regional Manager at:**

**E-MAILTO: [sqa@gdls.com](mailto:sqa@gdls.com)**

***The email subject line must contain "Source Inspection Request"***

**SECOND OPTION FAX FORM TO: (586) 446-7568**

**ALL INFORMATION ABOVE MUST BE COMPLETED OR THE DOCUMENT  
WILL NOT BE PROCESSED**

Data entered onto this form can be saved if you have a purchased licensed version of Adobe Acrobat.  
The free Adobe Reader (downloaded version) will NOT allow you to save your completed form.

6/2/05