

## DI-MISC-80678 Certification/Data Report

**Certification Type** (IAW Block 3 of CDRL, DD Form 1423): \_\_\_\_\_

**Data/Item No.** (IAW Block 1 of CDRL, DD Form 1423): \_\_\_\_\_

Seller must complete and sign this Certification/Data Report in accordance with **DI-MISC-80678** for the items listed below. **Please include a copy with each shipment.** This certificate must show traceability to the marking applied to each individual item.

If you have questions about this certificate, please contact:

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

<b>Contractor Name:</b>	<b>Contractor Address &amp; Phone Number:</b>
Atlantic Diving Supply, Inc.	621 Lynnhaven Parkway
<b>Contractor CAGE Code:</b>	Suite 400
1CAY9	Virginia Beach, VA 23452 (757) 481-7758
<b>Contract #:</b>	<b>Delivery Order # (if applicable):</b>
<b>Applicable Specification, Drawing or Standard:</b>	

**Manufacturer fill in below:**

<b>Manufacturer Name:</b>		<b>Manufacturer Address:</b>	
<b>Manufacturer CAGE Code:</b>			
<b>Supplies Manufactured or Produced</b> <i>(provide a separate Certificate of Quality Compliance for each type of product)</i>			
<b>NSN:</b>		<b>Mftr Part #:</b>	
<b>Nomenclature:</b>		<b>Qty:</b>	
List lubricants, sealants, anti-seize and/or threadlocking compounds (when used):			
<b>Cure date (if applicable):</b>			
<b>Manufacturer's compound number (if applicable):</b>			

**ADS Purchase Order Attachment: DI-MISC-80678 (page 2 of 3)**

**Traceability:**

Please provide a list of identification marking for all items supplied.

<b>NSN or Part Number:</b>	<b>Serial Number or Unique Identifier:</b>

**Tests & Inspections:**

Please provide a list of all tests and inspections that were satisfactorily performed on this/these item(s).

<b>Test/Inspection Performed</b>	<b>Date:</b>

**Certification of Completion (applicable if checked)**

I, \_\_\_\_\_, certify that all tests have been performed, inspections made, parts/assemblies/equipments/systems have been installed, tested, inspected and area ready for operation, or that specific qualifications have been obtained shall provide objective evidence in support of the certification. Objective evidence (such as spectrographs, radio graphs, material sampling, analysis, inspection and testing reports, or any other necessary documentation) are listed above and provided as an attachment with this form.

**Certification of Personnel (applicable if checked)**

I, \_\_\_\_\_, certify that personnel have specific qualifications required to carry out contract requirements. Necessary licenses, permits, tests, statements of competency or other documentation to support personnel qualifications are provided as an attachment with this form.

**Certification of Data Reviews (applicable if checked)**

I, \_\_\_\_\_, certify that documentation/data has been reviewed and results of the examination are provided as an attachment with this form.

(If documentation cannot be certified, the report shall so state and shall list the reasons why.)

**Certificate of Compliance (applicable if checked)**

I, \_\_\_\_\_, certify that all items furnished on this contract are in full compliance with the specifications and requirements All tests and inspections performed on this item, including any Hull, Mechanical and Electrical testing if required, were performed satisfactorily.

**Supplemental Information:**

Seller should attach all supplemental information, including test reports, licenses, permits, statements of competency or any other documentation serving as objective evidence that contract requirements have been met.

**Supplier Signature:**

\_\_\_\_\_  
Signature Title Company Date

**ADS Signature:**

\_\_\_\_\_  
Signature Title Company Date