



ATS Form Instruction

- **what** and **how** to complete

Version: November 16, 2017



Acronyms

Acronym	Description
ATS	Authorization to Ship
CoC	Certificate of Compliance
eSMDR	electronic Supplier Master Document Register
MRB	Manufacturing Record Book
PO	Purchase Order
SMDR	Supplier Master Document Register
SN	Serial Number
WED	With Each Delivery

ATS Form – Page 1

TechnipFMC		Authorization to Ship (ATS) Form	
Revised documentation accompanies this ATS Form <input type="checkbox"/>			
Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement			
Supplier name		Submission date	
TechnipFMC Purchase Order		PO line	
TechnipFMC Work Order		Submission quantity	
TechnipFMC Part Number		TechnipFMC Part Number rev.	
TechnipFMC Part Description			
Serial number			
Production date			
Lifting certificate date			
Batch number			
Heat number			
Drop Shipment Location - Populate if part(s) is not shipping to the TechnipFMC location that created the PO			
Company name		City, State, Country	
Quality Notifications (QN) - List all QNs affecting this delivery in appropriate box indicating status			
QN status	QN number(s)		
OPEN			
CLOSED			
Comments			
NOTE:			
1) ATS Form from Supplier will be processed and returned within allotted regional turnaround time.			
2) A hard copy of the applicable approved ATS form shall be included with shipping documents that accompany physical shipment of part(s)			
3) Do not submit duplicate ATS forms.			

Part 2 - To be completed by TechnipFMC - Check 'X' in appropriate box to indicate approval status			
TechnipFMC document review		Remark	
Authorization to Ship <input type="checkbox"/>		Rejected <input type="checkbox"/>	If Rejected no parts are allowed to be shipped. Revised documents must be re-submitted with a new ATS form.
Comments - List open QNs if approval to ship with these open are given			
Reviewer sign		Electronic signature	
Reviewer name			
Date			

To be completed by TechnipFMC
ATS Reviewer

To be completed by Supplier

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

- Do **not** tick if the ATS is new submission.
- Only tick if revised documents are submitted.

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

Your company name as stated on the PO from TechnipFMC.

The date ATS is submitted to TechnipFMC.

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

PO number from TechnipFMC.

Respective PO line numbers for the submittal.

When multiple PO lines are submitted for the same PO, use Page 2 of the ATS Form and write: “Multiple PO lines, refer Page 2”

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

TechnipFMC Work Order number **when** required by PO for outsourced services.

If relevant and not stated in PO, then the Commercial Point of Contact, the Buyer, shall be approached.

Fill in quantity to deliver and covered by the ATS.

When multiple PO lines are submitted for the same PO, use Page 2 of the ATS Form and write: “Multiple PO lines, refer Page 2”

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

TechnipFMC's Part Number and its revision number, **as built** and as referenced in PO.

When multiple PO lines are submitted for the same PO, use Page 2 of the ATS Form and write: "Multiple PO lines, refer Page 2"

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

TechnipFMC's Part Description as per PO line.

When multiple PO lines are submitted for the same PO, **leave it blank.**

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form <input type="checkbox"/>	
Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement	
Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

Fill in serial number (SN) covered by the ATS if **required** by Part Report per specification **Q03401**.

If the ATS is for multiple SNs in a complete range, the lowest and highest SN shall be separated with the word “through”, e.g. 10124-1 through 10124-15.

If the ATS is for multiple SNs not in a range the SNs shall be separated with comma, e.g. 10124-1, 10124-4, 10124-7 and 10124- 9.

If the ATS is for multiple SNs(>10) and not in a range, then use Page 2 and write “Multiple serial numbers, refer Page 2”.

Serial number shall be a unique code for the par, and shall be maximum 18 characters. Space shall not be a part of the serial number.

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name		Submission date	
TechnipFMC Purchase Order		PO line	
TechnipFMC Work Order		Submission quantity	
TechnipFMC Part Number		TechnipFMC Part Number rev.	
TechnipFMC Part Description			
Serial number			
Production date / Lifting certificate date			
Batch number			
Heat number			

Only applicable for non-metallic materials and lifting tools/assy.

Enter certificate issue date for parts with lifting certificate requirement:

Enter the oldest date if multiple items in the assembly.

For perishable parts (seals, fluids, etc.), enter the oldest production (cure) date for kits:

Cure Q1 = YYYY-01-01

Cure Q2 = YYYY-04-01

Cure Q3 = YYYY-07-01

Cure Q4 = YYYY-10-01

Date format is fixed to be ISO 8601 compliant:
YYYY-MM-DD

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form <input type="checkbox"/>	
Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement	
Supplier name	Submission date
TechnipFMC Purchase Order	PO line
TechnipFMC Work Order	Submission quantity
TechnipFMC Part Number	TechnipFMC Part Number rev.
TechnipFMC Part Description	
Serial number	
Production date / Lifting certificate date	
Batch number	
Heat number	

Fill in batch number (BN) covered by the ATS if **required** by Part Report per specification **Q03402**.

If the ATS is for multiple BNs in a complete range the lowest and highest BN shall be separated with the word “through”, e.g. 10124 through 10129.

Quantity used for every batch shall be indicated between bracked in the Batch Number field, e.g.: B12506(9).

If the ATS is for multiple BNs not in a range the BNs shall be separated with comma, e.g.: 10124, 10126, 10128 and 10129, or use page 2 to list all batch numbers and write “Multiple batch numbers, refer Page 2”.

Batch number shall be a unique code, not repeated for other batches, and shall be maximum 10 characters long. Space shall not be a part of the batch number.

Fields to complete by Supplier on Page 1

Revised documentation accompanies this ATS Form

Part 1 – To be completed by Supplier - All fields are mandatory where applicable per PO and Part Report requirement

Supplier name		Submission date	
TechnipFMC Purchase Order		PO line	
TechnipFMC Work Order		Submission quantity	
TechnipFMC Part Number		TechnipFMC Part Number rev.	
TechnipFMC Part Description			
Serial number			
Production date / Lifting certificate date			
Batch number			
Heat number			
Drop Shipment Location - Populate if part(s) is not shipping to the TechnipFMC location that created the PO			
Company name		City, State, Country	

Mention applicable Heat Number(s)

Complete if the shipping location other than the TechnipFMC location it was procured for. This also applies if the material will remain at its current location.

For further clarification see PO or approach the Commercial Point of Contact, the Buyer.

Fields to complete by Supplier on Page 1

Quality Notifications (QN) - List all QNs affecting this delivery in appropriate box indicating status	
QN status	QN number(s)
OPEN	
CLOSED	
Comments	

List all QNs affecting this delivery in the appropriate box indicating QN status.

TechnipFMC requires all QNs to be closed or have no outstanding actions for Supplier at time of ATS submittal.

Use this cell for any comment/clarification applicable for the QNs or the ATS package in general.

Fields to complete by Supplier on Page 2

PO line	TechnipFMC Part Number	Revision	Quantity	Production date / Lifting certificate date (YYYY-MM-DD)	Serial / Batch number

If one ATS Form is being used for several PO lines, Supplier shall use the second page for:

- ▶ PO line number
- ▶ TechnipFMC's Part Number
- ▶ Revision of the Part Number
- ▶ Quantity delivered/submitted
- ▶ Production date/Lifting certificate date (if applicable)
- ▶ Serial number/Batch number

Examples

Find examples as 'Attachments' within this PDF file.



Example-1

Example-2

Frequently Asked Questions

1. Where to find the ATS Form and instruction?

The ATS Form and instruction can be found at www.fmctechnologies.com/suppliers

2. Can I edit font size in the ATS Form?

Yes, fonts can be adjusted where there is a requirement to fit the information in a single cell in the ATS Form.

3. Do I need to save the Excel file as PDF format, to send the PDF file to TechnipFMC?

No, preferably the ATS Form shall be submitted as an Excel file. When reviewed, TechnipFMC will return the form to Supplier in PDF format.

4. Can I use the Page 1 of the ATS Form only when submitting multiple Part Numbers / PO lines?

No, use Page 2, and make a clear reference to Page 2 on Page 1.

5. If I have more information other than the specified field where shall I write?

You can use Comment field (below QN) to provide additional information.

6. Do I (Supplier) need to sign the ATS Form?

No, signature will be done by the person who reviews the documents and ATS Form for TechnipFMC.

Frequently Asked Questions

7. Can I use a single cell for multiple serial numbers?

Yes, you can use single cell for multiple serial numbers when a single part number. When for different part numbers, use different cells to provide serial numbers.

8. Could the ATS also be approved by TechnipFMC inspectors at site?

No. The review performed by the TechnipFMC inspectors at site is just to help Supplier to identify anything that needs to be fixed before submitting the documentation to the ATS email address.

9. If the ATS is submitted for one PO line with e.g. quantity 5, with 5 document packages, and only 3 are approved, what can the Supplier do?

Option 1: Supplier can correct errors and get ATS approved for all five parts.

Option 2: Split the delivery into two and submit ATS Form for the “approved” quantities, then correct the errors for the remaining quantities and resubmit as a separate ATS request.

10. What is the turnaround time for ATS response?

The Commercial Point of Contact, the Buyer, will be able to indicate the turnaround time for ATS for the relevant TechnipFMC location/team.

Frequently Asked Questions

11. If the Part Number is serialized, shall Supplier mention the batch number in the ATS Form?

For serialized parts (**Q03401**):

- ▶ ATS shall have serial numbers in the serial number field on Page 1, or Page 2 when multiple numbers. When Page 2 is used, write “Refer Page 2” in the serial number field on Page 1.
- ▶ The heat number can be referenced in the heat number field.
- ▶ For serialized parts, do not enter anything in the batch field.

For batch managed parts (**Q03402**):

- ▶ ATS shall have batch numbers in the batch number field on Page 1, or Page 2 when multiple numbers. When Page 2 is used, write “Refer Page 2” in the batch number field on Page 1.
- ▶ The heat number can be referenced in the heat number field.
- ▶ The heat number can be referenced in both the heat and the batch number field when this is the same.
- ▶ If the part is batch managed, do not enter a serial number in the serial number field.

Frequently Asked Questions

12. Does Supplier need access to TechnipFMC Partner Portal in order to submit ATS requests?

Not mandatory. If not having access to TechnipFMC Partner Portal, Supplier can send the ATS Form together with any final documentation (MRB or WED package) by email to ATS mailbox.

Contact Supplier Quality for size limit of the MRB/WED documentation.

If Supplier has access to TechnipFMC Partner Portal, documentation should be uploaded in the application named 'PO Doc Collaboration' and ATS Form shall be emailed to ATS address specified in the PO.

13. Will transmittals continue with the ATS process? (if applicable)

Only for locations where the MRB format is required for the final documentation package.

