

ATS Form Instruction - what and how to complete

GTF-GSOP-COR-21003-02 Rev 01

July 2020

This document and all information herein are confidential, and may not be used, reproduced or distributed without prior authorization of TechnipFMC.



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

🚺 Те

Page 2

This document replaces TPL 10000183596, version 05				Page 1 of 2	This document	replaces T
				on to Ship (ATS) Form DR-21003-03 Rev 0 June 2019	PO line	т
Revised documentatio	n accompanies this ATS Form					
Part 1 – To be cor	mpleted by Supplier - Al Seids are man	datory where applicable per PO and Pi	art Report requirement			
Supplier name		Submission	date			-
TechnipFMC Purchase Order		PO line				
TechnipFMC Work Order		Submission	quantity			
TechnipFMC Part Number		TechnipFM Part Numbe				
TechnipFMC Part Description		Part Numbe	n ruv,			-
Serial number						
Production date /						
Lifting certificate date Batch number	5					
Heat number						
Drop Shipment L	ocation - Populate if part(s) is not shipping t	to the TechnipFMC location that create	id the PO			-
Company name		City, State, Country				
Quality Notificatio	one (QN) - List all QNs affecting this delivery	y in appropriate box indicating status				1
QN status	QN number(s)					
OPEN	Max Lening (a)					
CLOSED						
						-
Comments						
NOTE: 1) ATS Form from St	upplier will be processed and returned within a	liotled regional turnaround time.				
2) A hard copy of the 3) Do not submit dup	applicable approved ATS form shall be includ	ed with shipping documents that accord	mpany physical shipment of p	part(s)		
Part 2 - To be con	npleted by TechnipFMC - Check % in a	appropriate box to indicate approval at	atus			
TechnipFMC doc	ument review		Remark			
				d to the efficienced		
Authoria	zation to Ship	Rejected	If <u>Baracted</u> no ports are allowed Revised documents must be re-	submitted with a new ATS form.		-
Comments - List o	pen QNs if approval to ship with these open an	e given				-
						-
Reviewer sign						-
		Electronic				-
Reviewer name		signature				-
Date						

PO line	TechnipFMC Part Number	Revision	Quantity	Production date / Lifting certificate date (vvvv-MM-DO)	Serial / Batch number
					0
			-	-	
					9
				1	

Page 2 of 2

ATS Form – Page 1

		Authorization to Shi	p (ATS) Form		Part 2 - To be comp	leted by Technip	DFMC - Check 'X' in ap	propriate box to indic	ate approv
					TechnipFMC docur	nent review			Re
Revised documentation accompanies this ATS				~	Authoriza	tion to Ship		Rejected	If <u>B</u> evi
Part 1 – To be completed by Supplie	er - All fields are mandatory where applicable p	er PO and Part Report requirement			Comments - List ope			·	nem
Supplier name	Submi	ssion date				in gros in approvanto s	nip with these open are	given	
TechnipFMC Purchase Order	POline	•							
TechnipFMC Work Order	Submi	ssion quantity			Reviewer sign			Electronic	
TechnipFMC Part Number	Techn Part N	ipFMC umber rev.			Reviewer name			signature	
TechnipFMC Part Description					Date				
Serial number									
Production date r							Talaa		t a al
Batch number								comple	
							by T	echnip F	MC
Heat number							ATS	Reviewe	er
Drop Shipment Location - Populate if p	eart(s) is not shipping to the TechnipFMC locat	ion that created the PO							
Company name	City, State, Count	у							
Quality Notifications (QN) - List all QNs	affecting this delivery in appropriate box indicat	ing status							
QN status QN number(s)				۲	To be comple	ted			
OPEN					To be comple by Supplier				
CLOSED					y = - - -				
Comments									
NOTE: 1) ATS Form from Supplier will be processed 2) A hard copy of the applicable approved ATS 3) Do not submit duplicate ATS forms.			rt(s)						



in appropriate box to indicate approval status

Remark

If <u>Rejected</u> no parts are allowed to be shipped. Revised documents must be re-submitted with a new ATS form.

ATS Form – Page 2

PO line	TechnipFMC Part Number	_	Production date / Lifting certificate date (YYYY-MM-DD)	Serial / Batch number	
					To be complet
					To be complet Supplier if one Form is used multiple PO from one singl
					from one sing

eted by ne ATS ed for lines gle PO.



				-
Revised documentatio	n accompanies this ATS Form			
Part 1 – To be cor	npleted by Supplier - All fields are mandatory where ap	plicable per PO and Part Report requir	rement	 Do not tick if the ATS is <u>new</u> submission. Only tick if revised documents are submitted.
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				
Revised documentatio	n accompanies this ATS Form			
Part 1 – To be cor	npleted by Supplier - All fields are mandatory where ap	plicable per PO and Part Report requir	rement	Your company name as stated on the PO from
Supplier name	4	Submission date		TechnipFMC.
TechnipFMC		PO line		
Purchase Order		1 O line		
TechnipFMC Work Order		Submission quantity		— The date ATS is submitted to TechnipFMC.
TechnipFMC Part Number		TechnipFMC Part Number rev.		
TechnipFMC Part Description				
Serial number				
Production date / Lifting certificate date				
Batch number				
Heat number				
Techn	ipFMC			

Revised documentation	accompanies this ATS Form	
Part 1 – To be com	pleted by Supplier - All fields are mandatory where applicable per PO and Part Report requirement	PO number from TechnipFMC.
Supplier name	Submission date	
TechnipFMC Purchase Order	PO line	Respective PO line numbers for the submittal.
TechnipFMC Work Order	Submission quantity	
TechnipFMC Part Number	TechnipFMC Part Number rev.	When multiple PO lines are submitted for the same
TechnipFMC	r activitier for.	PO, use Page 2 of the ATS Form and write:
Part Description		"Multiple PO lines, refer Page 2"
Serial number Production date /		
Lifting certificate date		
Batch number		
Heat number		
Revised documentation	accompanies this ATS Form	TechnipFMC Work Order number when required by
	apleted by Supplier - All fields are mandatory where applicable per PO and Part Report requirement	PO for outsourced services.
Supplier name	Submission date	
TechnipFMC Purchase Order	PO line	If relevant and not stated in PO, then the Commercial
TechnipFMC Work Order	Submission quantity	Point of Contact, the Buyer, shall be approached.
TechnipFMC Part Number	TechnipFMC Part Number rev.	
TechnipFMC Part Description		Fill in quantity to deliver and covered by the ATS.
Serial number		
Production date / Lifting certificate date		When multiple PO lines are submitted for the same
Batch number		PO, use Page 2 of the ATS Form and write:
Heat number		"Multiple PO lines, refer Page 2"
Techn	ipFMC	7

Revised documentation accompanies this ATS Form		
Part 1 – To be completed by Supplier - All field		
Supplier name	Submission date	
TechnipFMC Purchase Order	PO line	TechnipFMC's Part Number and its revision
TechnipFMC Work Order	Submission quantity	number, as built and as referenced in PO.
TechnipFMC Part Number	TechnipFMC Part Number rev.	When multiple PO lines are submitted for the same
TechnipFMC Part Description		When multiple PO lines are submitted for the same
Serial number		 PO, use Page 2 of the ATS Form and write: "Multiple PO lines, refer Page 2"
Production date / Lifting certificate date		
Batch number		
Heat number		
Part 1 – To be completed by Supplier - All field Supplier name	ds are mandatory where applicable per PO and Part Report requirement	
TechnipFMC Purchase Order	PO line	
TechnipFMC Work Order	Submission quantity	
TechnipFMC Part Number	TechnipFMC Part Number rev.	TechnipFMC's Part Description as per PO line.
TechnipFMC Part Description		When multiple PO lines are submitted for the same
Serial number		 When multiple PO lines are submitted for the same PO, leave it blank.
Production date / Lifting certificate date		
Batch number		
Heat number		
TechnipFMC		

Revised documentation	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					

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.



9

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
	e.g. 3Q20 - 3rd Quarter, Year 2020.
	Cure M1 = YYYY-01-01
	Cure M2 = YYYY-02-01
	Cure M12 = YYYY-12-01
	e.g. 2M20 - 2nd Month, Year 2020.
	Date format is fixed to be ISO 8601 compliant: YYYY-MM-DD



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					

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

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.

Page 2".



11

Revised documentation accompanies this	ATS Form				
Part 1 – To be completed by Supp	blier - All fields are mandatory where appl	icable per PO and Part Report requir	ement		
Supplier name		Submission date			
TechnipFMC Purchase Order		PO line			
TechnipFMC Work Order		Submission quantity			
TechnipFMC Part Number		TechnipFMC Part Number rev.			
TechnipFMC Part Description		l			
Serial number					
Production date / Lifting certificate date					
Batch number					
Heat number				Mention app	blicable Heat Number(s)
Drop Shipment Location - Populate	if part(s) is not shipping to the TechnipFMC	C location that created the PO			
Company name	<mark>City, State</mark>	, Country			
				-	
1	ping location other the s if the material will re			procured	
For further clarificati	ion see PO or approa	ach the Commerc	ial Point of Contac	ct, the Buyer.	

Quality Notifications (QN) - List all QNs affecting this delivery in appropriate box indicating status		List all QNs affecting this delivery in the appropriate box indicating QN status.
QN status	QN number(s)	
OPEN		TechnipFMC requires all QNs to be closed or have no outstanding actions for Supplier
CLOSED		at time of ATS submittal.
Comments		
	•	Use this cell for any comment/clarification applicable for the QNs or the ATS package in general.



PO line	TechnipFMC Part Number	Revision	Quantity	-	Serial / Batch number
•		†	•	date (YYYY-MM-DD)	-

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



1.Where to find the ATS Form and instruction? The ATS Form and instruction can be found at : <u>https://www.technipfmc.com/en/services/suppliers/documents-and-templates</u>

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

Yes, fonts can be adjusted were 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.



CONFIDENTIAL

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.



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.



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.





This document and all information herein are confidential, and may not be used, reproduced or distributed without prior authorization of TechnipFMC.

