

Instructions for Completing FAA Form 8120-11, Suspected Unapproved Parts Report

Paperwork Reduction Act Statement:

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Privacy Act Statement:

This statement is provided pursuant to the Privacy Act of 1974, 5 U.S.C. § 552a. The authority for collecting this information is contained in 49 U.S.C. 44701. The principal purpose for which the information is collected is to support Suspected Unapproved Parts (SUP) investigations and management reports. Submission of this information is voluntary and is necessary to support the FAA's commitment to promote safety. Information developed from this form is covered under the Privacy Act system of records DOT/FAA 852 and the routine uses of that system will apply. These routine uses include sharing of information with law enforcement agencies for use in civil and criminal investigations, as well as the Department of Transportation prefatory routine uses, which are available at <https://www.transportation.gov/individuals/privacy/privacy-act-system-records-notices>. Individuals who submit reports may request confidentiality of personal information to the extent permitted by the Freedom of Information Act (5 USC 552) and the Privacy Act (5 USC 552a).

An electronic copy of FAA Form 8120-11, Suspected Unapproved Parts Report, is available on the FAA website at <http://www.faa.gov/aircraft/safety/programs/sups>. You may complete the electronic FAA Form 8120-11 and send it to the FAA Hotline email: FHIS@faa.gov.

The instructions below correspond to numbered blocks on the Suspected Unapproved Parts Report:

1. Record the date the part was discovered.
2. Record the part name (or a description of the part).
3. Record the part number or identification number of the part.
4. Record the serial number on the part, if applicable.
5. Record the quantity of parts.
6. Record the assembly name and assembly number (where the part was or could be installed).

Record additional part numbers on page 3 or on a blank sheet of paper with the same information. Example:

Part Name: **Strut** | Part Number: **1234** | Serial Number: **678** | Quantity: **1** | Assembly Name: **Main Landing Gear** | Assembly Number: **56789X**

7. Record the type of aircraft the part was (or could be) installed on.
8. Record the complete name and address of the company or person who produced, repaired, and/or sold the part. Do not list a P.O. Box address unless a street address is not available. Check the box that describes the company or person and provide the certificate number, if known (see explanations of participants below).

Air Carrier - An FAA-certificated company or person who undertakes directly by lease, or other arrangement, to engage in air transportation.

Distributor - A broker, dealer, reseller or other person or agency engaged in the sale of parts.

Manufacturer - The original equipment manufacturer (OEM.)

Mechanic - A person holding an FAA mechanics certificate with airframe and/or powerplant ratings.

Other - Record other type of business.

Owner/Operator - The owner or operator of an aircraft.

Production Approval Holder - A company or person holding one of the following three types of FAA production approvals: production certificate, parts manufacturer approval, or technical standard order authorization.

Repair Station - An FAA-certificated repair station.

Supplier - A company or person who furnishes aircraft parts or related services, at any tier, to the producer of a product or part thereof.

Unknown - If not known, check this box.

9. Record a brief narrative stating why you believe the part is not approved. Include a description of the part (improper configuration, suspect marking, different material, etc.), where it was obtained, and what type of documentation was supplied with it.
10. Record the complete name and address of the location where the part was found. Check the appropriate block to reflect the affiliation of the company or person who discovered the part.
11. Record the date the FAA Form 8120-11 is being submitted.
12. Check this box if you request anonymity (do not wish to provide your identity), and do not complete 13 or 14.
13. Record your name, address and phone number, if desired. This information will enable the FAA to contact you for additional information, if necessary.
14. Check this box if you request confidentiality of your personal information recorded in block 13.
15. Check this box if you have provided additional information (photos, invoices, certification statements, etc.).

Forward the completed FAA Form 8120-11, Suspected Unapproved Parts Report, to:

**Federal Aviation Administration
Office of Audit and Evaluation, (Room 911)
800 Independence Avenue, SW, Washington, DC 20591**



SUSPECTED UNAPPROVED PARTS REPORT

1. Date the Part Was Discovered:		2. Part Name:	
3. Part Number:		4. Part Serial Number:	
5. Quantity:	6. Assembly Name and Number: Name: Number:	7. Aircraft Make & Model: Make: Model:	
8. Name, Address, and Description of the Company or Person Who Supplied or Repaired the Part:			
Name:		Street Address:	
City:	State:	Zip Code:	
Country:		Phone Number:	
Check One of the Following Applicable to the Company or Person Who Supplied or Repaired the Part:			
Air Carrier - Certificate #		Supplier	
Mechanic - Certificate #		Production Approval Holder	
Repair Station - Certificate #		Manufacturer	
Distributor		Other	
Owner/Operator		Unknown	
9. Description of the Issue: (attach additional sheet if necessary)			
10. Name and Address of (the Company or Person) Where the Part Was Discovered:			
Name:		Street Address:	
City:	State:	Zip:	
Country:		Phone Number:	
Check One of the Following Applicable to the Company or Person Who Discovered the Part:			
Air Carrier - Certificate #		FAA Inspector	
Mechanic - Certificate #		DOT/Office of Inspector General	
Repair Station - Certificate #		Defense Criminal Investigation Service	
Distributor		Other Government Agency	
Supplier		Foreign Civil Aviation Authority	
Production Approval Holder		Owner/Operator	
Unknown		Other	
11. Date of this report			
12. Check this box if you request anonymity - Do not complete block 13.			
13. Name and Address of the Reporter:			
Name:		Street Address:	
City:	State:	Zip Code:	
Country:		Phone Number:	
14. Check this box if you request confidentiality.			
15. Check this box if you have attached additional information.			

