**1. Customer Part and Order Information**

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| --- |
| Customer Part No:                     Customer Name:      Customer Part Name:       Purchase Order No:      Part Issue:       Required PPAP Date:      Drawing No:       Customer Buyer:      Drawing Issue:       Customer SQA:       |

**2. Supplier and Manufacturing site information**

|  |
| --- |
| Supplier Name:       Company Name:      Supplier no:      Location:      Address:       Location:       |

**3. Environment**

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| Does the product contain any restricted or reportable substances?[ ]  Yes, declaration is enclosed. [ ]  No |

**4.** **Requested submission**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| [ ] **1** | [ ] **2** | [ ] **3** | [ ] **4** | [ ] **5** | [ ] **6** | [x] **7** | [x] **8** | [ ] **9** | [ ] **10** | [ ] **11** | [ ] **12** | [x] **13** | [ ] **14** | [ ] **15** | [ ] **16** | [ ] **17** | [ ] **18** | [ ] **19** |
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| 1. Design Records
2. Engineering change Documents
3. Customer Engineering Approval
4. Design FMEA
5. Process Flow Diagram
6. Process FMEA
7. Dimensional Results
 | 1. Material, performance, Cert.
2. Initial Process Study
3. Measurement. System Analyses (MSA, CPK)
4. Qualified Laboratory Doc.
5. Control Plan
6. Part Submission Warrant
7. Appearance Approval Report
 | 1. Bulk material Requirements Checklist
2. Sample Product
3. Master Sample
4. Checking Aids
5. Traceability
 |

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**5. Supplier reason for submission / Comments**

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| [ ]  Initial Submission [ ]  Change to Optional Construction or material[ ]  Engineering Change(s) [ ]  Sub-Supplier or Material Source Change[ ]  Tooling: Transfer, Replacement, Refurbishment, or additional [ ]  Change in Part Processing[ ]  Correction of Discrepancy [ ]  Parts Produced at Additional Location[ ]  Tooling inactive > than 1 year [ ]  Other - please specify:      Comments:      |

**6. Supplier Declaration**

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| ***I hereby affirm that the samples represented by this certification are representative of our parts and are fulfilling all requirements, have been made to the applicable drawing and specification, and made from the specified materials on regular production tooling with no operations other than the regular production process. I also certify that document evidence of such compliance is on file and available for review*.**Number of parts produced in the significant production run:Start date of production:Date:       Phone no:     Print Name:       Fax no:      Signature:  E- Mail:       |

**7. Customer SQA approval**

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| --- |
| [ ]  PSW Approved[ ]  PSW Interim approved The PSW will be valid until:       Date / Volume:      [ ]  PSW Not approvedDate:      Print Name:       Department:     Signatue:       |