

Part Name: <u>CVNS PPSD BKGN 06 CTN MR FRD</u>		Cust. Part Number: <u>63672NS</u>	
Shown on Drawing No.: <u>CV/CVNS PPSD SOFORD GENERIC</u>		Org. Part Number <u>63672;Generic: 62075</u>	
Engineering Change Level <u>B</u>		Dated <u>11/23/2023</u>	
Additional Engineering Changes <u>NA</u>		Dated <u>NA</u>	
Safety and/or Government Regulation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Purchase Order No. <u>NA</u> Weight (kg) <u>9.9 G/MTR</u>	
Checking Aid No. <u>NA</u> Checking Aid Engineering Change Level <u>NA</u>		Dated: <u>NA</u>	

ORGANIZATION MANUFACTURING INFORMATION DELFINGEN RO-TRANSILVANIA DUNS : 68-117-3071 Organization Name & Supplier/Vendor Code <u>Calea Aurel Vlaicu; Nr. 297/A</u> Street Address <table border="0" style="width: 100%;"> <tr> <td>Arad</td> <td>Arad</td> <td>310375</td> <td>Romania</td> </tr> <tr> <td>City</td> <td>Region</td> <td>Postal Code</td> <td>Country</td> </tr> </table>	Arad	Arad	310375	Romania	City	Region	Postal Code	Country	CUSTOMER SUBMITTAL INFORMATION <u>Nursan</u> Customer Name/Division: <u>Automotive</u> Buyer/Buyer Code Application
Arad	Arad	310375	Romania						
City	Region	Postal Code	Country						

MATERIALS REPORTING
 Has customer-required Substances of Concern information been reported? ☐ Yes ☐ No ☒ n/a

Submitted by IMDS or other customer format: 912111719 / 3

Are polymeric parts identified with appropriate ISO marking codes? ☐ Yes ☐ No ☒ n/a

REASON FOR SUBMISSION (Check at least one)

<input checked="" type="checkbox"/> Initial Submission <input type="checkbox"/> Engineering Change(s) <input type="checkbox"/> Tooling: Transfer, Replacement, Refurbishment, or additional <input type="checkbox"/> Correction of Discrepancy <input type="checkbox"/> Tooling Inactive > than 1 year	<input type="checkbox"/> Change to Optional Construction or Material <input type="checkbox"/> Supplier or Material Source Change <input type="checkbox"/> Change in Part Processing <input type="checkbox"/> Parts Produced at Additional Location <input type="checkbox"/> Other - please specify below
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Requested Submission Level (Check One)

☐ Level 1 - Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to the customer.

☐ Level 2 - Warrant with product samples and limited supporting data submitted to customer.

☒ Level 3 - Warrant with product samples and complete supporting data submitted to customer.

☐ Level 4 - Warrant and other requirements as defined by customer.

☐ Level 5 - Warrant with product samples and complete supporting data reviewed at organization's manufacturing location.

Submission Results
 The result for ☒ dimensional measurements ☒ material and functional tests ☐ appearance criteria ☐ statistical process package
 These results meet all design record requirements: ☒ Yes ☐ NO (If "NO" - Explanation required)
 Mold / Cavity / Production Process: Extrusion

Declaration
 I affirm that the samples represented by this warrant are representative of our parts which were made by a process that meets all Production Part Approval Process Manual 4th Edition requirements. I further affirm that these samples were produced at the production rate of 1200 MTR/ 1 hours. I also certify that documented evidence of such compliance is on file and available for review. I have noted any deviations from this declaration below.

EXPLANATION/COMMENTS: THIS PPAP IS CONSIDERED APPROVED WITHOUT CUSTOMER FEEDBACK WITHIN 30 DAYS OF SUBMISSION

Is each Customer Tool properly tagged and numbered? ☐ Yes ☐ No ☒ n/a

Organization Authorized Signature <u>Faur</u>		Date <u>04.04.2025</u>
Print Name <u>Faur Nicoleta</u>	Phone No. _____	FAX No. _____
Title <u>Quality Engineer</u>	E-mail <u>quality-ro-ar@delfingen.com</u>	

FOR CUSTOMER USE ONLY (IF APPLICABLE)

PPAP Warrant Disposition: ☐ Approved ☐ Rejected ☐ Other _____

Customer Signature _____ Date _____

Print Name _____ Customer Tracking Number (optional) _____

