

# Part Submission Warrant

Part Name \_\_\_\_\_ Cust. Part Number \_\_\_\_\_

Shown on Drawing Number \_\_\_\_\_ Org. Part Number \_\_\_\_\_

Engineering Change Level \_\_\_\_\_ Dated \_\_\_\_\_

Additional Engineering Changes \_\_\_\_\_ Dated \_\_\_\_\_

Safety and/or Government Regulation Yes No Purchase Order No. \_\_\_\_\_ Weight (kg) \_\_\_\_\_

Checking Aid Number \_\_\_\_\_ Checking Aid Engineering Change Level \_\_\_\_\_ Dated \_\_\_\_\_

## ORGANIZATION MANUFACTURING INFORMATION

## CUSTOMER SUBMITTAL INFORMATION

Organization Name and Supplier Code \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Region \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Customer Name/Division \_\_\_\_\_

Buyer/Buyer Code \_\_\_\_\_

Application \_\_\_\_\_

## MATERIALS REPORTING

Has customer-required Substance of Concern information been reported Yes No NA

Submitted by IMDS or other customer format \_\_\_\_\_

Are polymeric parts identified with appropriate ISO marking codes? Yes No NA

## REASON FOR SUBMISSION (Check at least one)

|  |   |
|--|---|
| 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 _____                |

## REQUESTED SUBMISSION LEVEL (Check one)

Level 1 - Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to 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 supplier's manufacturing location.

## SUBMISSION RESULTS

The results for dimensional measurement 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 \_\_\_\_\_

## 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 / hours

I also certify that documented evidence of such compliance is on file and is available for review. I have noted any deviations from this declaration below.

## EXPLANATION/COMMENTS

Is each Customer Tool properly tagged and numbered? Yes No NA

Organization Authorized Signature *Karla Soberanes R* Date \_\_\_\_\_

Print Name \_\_\_\_\_ Phone No. \_\_\_\_\_ Fax \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

## FOR CUSTOMER USE ONLY (IF APPLICABLE)

PPAP Warrant Disposition : Approved Rejected Other \_\_\_\_\_

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Customer Tracking Number (optional) \_\_\_\_\_