



Part Submission Warrant

Part Name Aluminized Glass Cloth Tape Cust. Part Number F1R-01
 Shown on Drawing Number ESKU5T1A303AA(D1R-10) Orig. Part Number 153627 250 Argent 19mm x 25m
 Engineering Change Level H Dated March 2023
 Additional Engineering Changes _____ Dated _____
 Safety and/or Government Regulation ☐ Yes ☒ No Purchase Order No. _____ Weight (kg) _____
 Checking Aid Number _____ Checking Aid Eng. Change Level _____ Dated _____

ORGANIZATION MANUFACTURING INFORMATION

Scapa France n.a.
 Organization Name & Supplier/Vendor Code

79 Allée Bernard PALISSY
 Street Address

VALENCE 26000 FRANCE
 City Region Postal Code Country

CUSTOMER SUBMITTAL INFORMATION

Nursan
 Customer Name/Division

 Buyer/Buyer Code

harnessing
 Application

MATERIALS REPORTING

Has customer-required Substances of Concern information been reported? ☐ Yes ☒ No ☐ n/a
 Submitted by IMDS or other customer format: 901787638

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

REASON FOR SUBMISSION (Check at least one)

- | | |
|---|--|
| <input type="checkbox"/> Initial submission | <input type="checkbox"/> Change to Optional Construction or Material |
| <input type="checkbox"/> Engineering Change(s) | <input type="checkbox"/> Sub-Supplier or Material Source Change |
| <input type="checkbox"/> Tooling: Transfer, Replacement, Refurbishment, or additional | <input type="checkbox"/> Change in Part Processing |
| <input type="checkbox"/> Correction of Discrepancy | <input type="checkbox"/> Parts produced at Additional Location |
| <input type="checkbox"/> Tooling Inactive > than 1 year | <input checked="" type="checkbox"/> Other - please specify |
| | <u>MOC 2312 Securisation</u> |

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 organization's manufacturing location.

SUBMISSION RESULTS

The results 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 _____

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 6 m /minutes. I also certify that documented evidence of such compliance is on file and available for your review. I have noted any deviation from this declaration below.

EXPLANATION/COMMENTS: Evaluations were done in principle on the test parts

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

Organization Authorized Signature Sara Balzaretto Date 24/06/2025

Print Name Sara Balzaretto Phone No. +390161 867440 Fax No. +390161860503

Title Scapa Italy - Quality Manager E-mail sara.balzaretto@mativ.com

FOR CUSTOMER USE ONLY (IF APPLICABLE)

PPAP Warrant Disposition: ☐ Approved ☐ Rejected ☐ Other _____

Customer Signature _____ Date _____

Print Name _____ Customer Tracking Number (optional) _____