



Part Submission Warrant

Part Name		TERM F OCS 1.5 ST		Cust. Part Number		JU5T-14474-ABB	
Shown on Drawing No.		13849927		Org. Part Number		35493302	
Engineering Change Level		DRAWING REV 05		Dated		30-MAY-2022	
Additional Engineering Changes				Dated			
Safety and/or Government Regulation		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Purchase Order No.		NA	
Checking Aid No.		Checking Aid Engineering Change Level		Weight (kg)		0.0003 kg	
				Dated			
ORGANIZATION MANUFACTURING INFORMATION				CUSTOMER SUBMITTAL INFORMATION			
APTIV /WSP Plant USA 11 / 107194362				NURSAN OTOM OTIV			
Organization Name & Supplier/Vendor Code				Customer Name/Division			
1265 NORTH RIVER ROAD M/S 11A				NA / NA			
Street Address				Buyer/Buyer Code			
WARREN OH 44483 USA				MULTIPLE			
City Region Postal Code Country				Application			
MATERIALS REPORTING							
Has customer-required Substances of Concern information been reported?							
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a Submitted by IMDS or other customer format: <input checked="" type="checkbox"/> IMDS <input type="checkbox"/> Other							
IMDS(Module) ID: 970672439 / Version No: 13							
Transmission Date: 2022-09-22 00:00:00							
Are polymeric parts identified with appropriate ISO marking codes?							
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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							
REQUESTED SUBMISSION LEVEL (Check one)							
<input type="checkbox"/> Level 1 - Warrant only (and for designated appearance items, an Appearance approval report) submitted to customer <input type="checkbox"/> Level 2 - Warrant with product samples and limited supporting data submitted to customer <input checked="" type="checkbox"/> Level 3 - Warrant with product samples and complete supporting data submitted to customer <input type="checkbox"/> Level 4 - Warrant and other requirements as defined by customer <input type="checkbox"/> Level 5 - Warrant with product samples and complete supporting data reviewed at supplier's manufacturing location							
SUBMISSION RESULTS							
The results for <input checked="" type="checkbox"/> dimensional measurements <input checked="" type="checkbox"/> material and functional tests <input checked="" type="checkbox"/> appearance criteria <input type="checkbox"/> statistical process package							
These results meet all design record requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "NO" - Explanation Required)							
Mold/cavity/Production Process 33385008MA0001							
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 <u>211200/8</u> 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:							
Is each Customer Tool properly tagged and numbered? STITT,RANDY <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a							
Organization Authorized Signature Date 28-SEPT-2022							
Print Name STITT,RANDY Phone No. FAX No.							
Title E-mail							
FOR CUSTOMER USE ONLY (IF APPLICABLE)							
PPAP Warrant Disposition: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Other							
Customer Signature Date							
Print Name Customer Tracking Number (optional)							