

Part Name: RHD (AM/FM/DAB) IP CONN TO AHU Cust. Part Number: R2X6-18812-LDB  
 Drawing No. R2X6-18812-LDB Org. Part Number: 10519219  
 Engineering Change Level: 20251124 / E 14843496 000 / A Dated: 24.11.2025  
 Additional Engineering Changes: \_\_\_\_\_ Dated: \_\_\_\_\_  
 Safety and/or Government Regulation:  Yes  No Purchase Order No. \_\_\_\_\_ Weight Kg: 0,034  
 Checking Aid No. \_\_\_\_\_ Checking Aid Engineering Change Level: \_\_\_\_\_ Dated: \_\_\_\_\_

ORGANIZATION INFORMATION		
MD ELEKTRONIK GmbH / DE - 316353721		
Organization Name & Supplier/Vendor Code		
Neutraublinger Straße 4		
Address		
Waldkraiburg	84478	Germany
City	Postal Code	Country

**CUSTOMER INFORMATION**

Customer Name: Nursan Otomotiv

Division: \_\_\_\_\_

Buyer: \_\_\_\_\_ Buyer Code: 405259

Application: \_\_\_\_\_

MANUFACTURING INFORMATION		
MD Elektronik spol. s.r.o. / CZ - 360541445		
Organization Name and code		
Dobřanská 629		
Address		
Chotěšov	332 14	Czech Republic
City	Postal Code	Country

### MATERIALS REPORTING

Has customer-required Substances of Concern information been reported?  Yes  No

IMDS N° : 1476144221 / 1

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

### REASON FOR SUBMISSION:

- |  |  |
|--|--|
| <input checked="" 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"/> Part Produced at Additional Location        |
| <input type="checkbox"/> Tooling Inactive > 1 year                                   | <input type="checkbox"/> Other - Please specify below                |

### REQUESTED SUBMISSION LEVEL

- 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 measurements  Material and functional tests  Appearance criteria  Statistical process package

These results meet all drawing and specification 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 44400 / 8 hours\*.

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

### EXPLANATION/COMMENTS:

\*capacity of the production line of the product group

Slave to master MD 10519211\_R2X6-18812-KCB, difference only in the cable length and the in the coding of the house (color).

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

Print Name: Martina Bilá Email: martina.bila@md-elektronik.cz Telephone: +420 733 685 989 Fax: \_\_\_\_\_

Department: QM Organization Authorized Signature: Bilá Date: 09.02.2026

### FOR CUSTOMER USE ONLY (IF APPLICABLE):

- PPAP Warrant Disposition:  Approved
- Rejected
- Conditional Approval


Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Optional Customer's Control Number: \_\_\_\_\_