



Phase and submission type
☐ Phase 1 ☐ Phase 2 ☒ Phase 3 ☐ Interim (Non-PPAP)

PPAP Submission Warrant

PART INFORMATION

Part Name SLV WIR CONN FEM Cust. Part Number 3M5T-14489-KBA
Shown on Drawing Number 3M5T-14489-KBA Organization Part Number 7283-6458-40
Engineering Change Level EE00-E-11421335-000 Dated 02.10.09
Additional Engineering Changes N/A Dated N/A
Safety and/or Government Regulation ☐ Yes ☒ No Purchase Order No. N/A Weight (kg) 0.0057
Checking Aid Number N/A Checking Aid Engineering Change Level N/A Dated N/A

ORGANIZATION MANUFACTURING INFORMATION

Yazaki Saltano de Ovar, PE. Lda
Organization Name and Supplier/vendor Code
Avenida D. Manuel I, Zona Industrial de Ovar
Street Address
3880 - 109 - OVAR CODEX PORTUGAL
City Region Postal code Country

CUSTOMER SUBMITTAL INFORMATION

FORD Yazaki Saltano de Ovar
Customer Name/Division
Buyer/Buyer Code Q1
Several
Application
Self certified supplier code: K8QED
IMDS ID 17022589

MATERIALS REPORTING

Has customer-required Substances of Concern information been reported?

Submitted by IMDS or other customer format:

If submitted by IMDS, enter Module ID number, version and date transmitted

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"/> 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 below |

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.

Annual Layout

SUBMISSION RESULTS

The results for ☒ dimensional measurements, ☒ material and functional tests ☐ appearance criteria ☐ statistical process package

These results meet all design requirements ☒ Yes ☐ No. (If "No" - Explanation Required).

Mold / Cavity / Production Process(es)

PI-1 / 8/8 / Injection Molding

DECLARATION

I affirm that the samples represented by this warrant are representative of our parts which were made by a process which meets all Production Part Approval Process Manual 4th Edition requirements including all Ford-specific requirements. I further affirm that these samples were produced at the production rate of 10.680 / 8 hours using 1 production streams. I also certify that documented evidence of such compliance is on file and is available for review. I have noted any exceptions from this declaration below.

EXPLANATION/COMMENTS (Dim.Report LKE-Z11-002932 of 05/2011)

(Soc Test LKE-Z08-001162 and LKE-Z08-001127)

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

Organization Authorized Signature Vânia Boia Date 23.11.2011

Print Name Vânia Boia Phone No. Fax No.

Title Quality Email vania.boia@yazaki-europe.com

FOR FORD USE ONLY

Phased PPAP
Warrant Status:

☒ Approved ☐ Rejected ☐ Interim Accepted

Customer Signature Cristina Almeida Date 28.11.2011

Print Name Cristina Almeida e-mail Cristina.Almei

a/ Non-PPAP indicates the part does not satisfy one or more PPAP requirements and is considered *incomplete* until all PPAP requirements are satisfied.

Interim Status (to be completed by the Organization)

Engineering Authorization Alert, Temp. PCM, TPD Number

Description: (Incomplete PPAP Requirements)