



Part Submission Warrant

Part Name _____ Cust. Part Number _____
 Shown on Drawing No. _____ 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 No. _____ Checking Aid Engineering Change Level _____ Dated _____

ORGANIZATION MANUFACTURING INFORMATION

CUSTOMER SUBMITTAL INFORMATION

Organization Name & Supplier/Vendor Code _____

Customer Name/Division _____

Street Address _____

Buyer/Buyer Code _____

City _____

Region _____

Postal Code _____

Country _____

Application _____

MATERIALS REPORTING

Has customer-required Substances of Concern information been reported? ☐ Yes ☐ No ☐ n/a

Submitted by IMDS or other customer format: _____

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

REASON FOR SUBMISSION (Check at least one)

☐ Initial Submission

☐ Engineering Change(s)

☐ Tooling: Transfer, Replacement, Refurbishment, or additional

☐ Correction of Discrepancy

☐ Tooling Inactive > than 1 year

☐ Change to Optional Construction or Material

☐ Supplier or Material Source Change

☐ Change in Part Processing

☐ Parts Produced at Additional Location

☐ 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 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 _____ / _____ 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? ☐ Yes ☐ No ☐ n/a

Organization Authorized Signature _____ Date _____

Print Name _____ Phone No. _____ FAX No. _____

Title _____ E-mail _____

FOR CUSTOMER USE ONLY (IF APPLICABLE)

PPAP Warrant Disposition: ☐ Approved ☐ Rejected ☐ Other _____

Customer Signature _____ Date _____

Print Name _____ Customer Tracking Number (optional) _____