

# SUPPLIER DEVIATION AUTHORIZATION REQUEST

DATE: \_\_\_\_\_

DEVIATION / CHANGE# \_\_\_\_\_

PERMANANT DEVIATION / CHANGE

TEMPORARY DEVIATION / CHANGE

## SUPPLIER TO COMPLETE

Supplier Name: Supplier Address:	Personnel responsible to lead this Change: Phone Number: Cell Phone Number: E-mail Address:
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### DESCRIPTION OF PART:

Part Number:	Part Description:	Drawing Rev. Level / Date	Affected fischer Part Number(s):
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### CHANGE LOGISTICS:

1) Opportunity / Problem Statement:

2) Description of Change: (What are you planning to do?) – Also check off the applicable box for Reason for Submission

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engineering Change	Relocation of Manufacturing	Tool / Equipment / Die	Discrepant Part	Sub-Supplier Material or Source Change	Change in Part Processing	Change in Sub-Supplier Part Processing	Other:

3) What is the aim for this change and why fischer should work on this change now?

### LIST OF SUPPORTING DOCUMENTS REQUIRED FOR THE PROPOSED CHANGE:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timing Plan Attached	Validation Plan Attached	Die Life Tracking Plan Attached	OEM Customer Specific Documentation Attached	Sample Parts / Pictures Attached	Parts Banking Plan	Other:

### POTENTIAL EFFECTS OF THE PROPOSED CHANGE:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Planned PPAP Date:	Planned Breakpoint Date:	Print Name:	Title:
Shipping Schedules	Piece Price (\$)	Tooling Cost to fischer (\$)			Signature _____	_____
					Supplier Representative	Date

## FISCHER TO COMPLETE

Program Manager:	QA Analyst:	Materials Manager:	Buyer:
Signature _____ Date _____	Signature _____ Date _____	Signature _____ Date _____	Signature _____ Date _____

### REASON FOR REJECTION OR QUALIFYING CONDITIONS OF ACCEPTANCE:

\* This approval is granted upon the understanding that it is advisory in nature and in no manner changes the Sellers original responsibility for insuring that all characteristic, designated in the applicable engineering specification and / or inherent in the samples as originally tested and approved, are maintained. Seller accepts full responsibility for the changes or types of changes listed above; and should such changes result in less satisfactory performance than experienced with the originally approved item, Seller will fully reimburse the Buyer for all expenses incurred to correct the deficiency.