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| **Section 1 : To be completed by the Originator / Supplier** | | | | | | | | | |
| **1. Ultra PCS Application Number:** | **2. Originator / Supplier Information:** | | | | | | | | **3. Number of Sheets** |
| Type Application Number | Enter Supplier Ref No. | | Enter Supplier Rev No | | Supplier Name & Address | | | | Sheet X of Y |
| **4. Drawing / Specification Number** | **5. Drawing / Specification Issue No.** | | | **6. Part Number Affected** | | | **7. Part Serial/ Batch/ Lot / ID Number** | | |
| Enter Drawing / Specification No | Enter Drawing / Spec Issue No | | | Enter Part Number Affected | | | Enter Applicable Information | | |
| **8. Description of Part** | | | | **9. Quantity Affected** | | **10. Shop / Purchase Order Number** | | | |
| Enter the description of the part | | | | Enter the Quantity affected | | Enter Shop , Purchase Order Number | | | |
| **11. Description of the Non-conformance** | | | | | | | | | |
| Use this space to describe the non-conformance in as much detail as possible using sketches and the continuation sheet if required. | | | | | | | | | |
| **12. Root Cause of the Non-conformance** | | | | | | | | | |
| Supplier to add the root cause of the Non-conformance | | | | | | | | | |
| **13. Supplier Proposed Corrective Action** | | | | | | | | | |
| Add Supplier Proposed Corrective Action  **Date effective:** | | | | | | | | | |
| **14. Originator:** | | | | | | | | | |
| Print Name | | Signature | | | | | | Date | |

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| **Continuation Sheet** | |
| **Section 1 : To be completed by the Originator / Supplier** | |
| **1. Ultra PCS Application Number:** | **3. Number of Sheets** |
| Type Application Number | Sheet X of Y |
| **11. Description of the Non-conformance** | |
| Use this space to describe the non-conformance in as much detail as possible using sketches and the continuation sheet if required. | |

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| **Section 2: To be completed by PCS Quality / Engineering** | | | | | | | | | | | | | | | | |
| **1. Ultra PCS Application Number:** | | | | | | | | | | | | | | **3. Number of Sheets** | | |
| Type Application Number | | | | | | | | | | | | | | Sheet X of Y | | |
| **15. Affected Items: (Ultra PCS to complete)** | | | | | | | | | | | | | | | | |
| Material Properties | | | Yes/ No | Functional Safety | | | | | | Yes/ No | | Qualification Data | | | | Yes/ No |
| Interchangeability | | | Yes/ No | Health & Safety | | | | | | Yes/ No | | Airworthiness | | | | Yes/ No |
| Maintainability | | | Yes/ No | Environmental Impact | | | | | | Yes/ No | | Cost | | | | Yes/ No |
| Life | | | Yes/ No | Mass | | | | | | Yes/ No | | Delivery Timescale | | | | Yes/ No |
| Reliability Data/ Predictions | | | Yes/ No | Spares | | | | | | Yes/ No | |  | | | |  |
| Dimensions/ Space Envelope | | | Yes/ No | Technical Publications & User Training | | | | | | Yes/ No | |  | | | |  |
| **16. Design/ Engineering Disposition of the Non-Conformity:** | | | | | | | **17. Quality Disposition of the Non-Conformity:** | | | | | | | | **18. Classification:** | |
| **Comments:** | | | | | **Design Authority:** | | Quality authority must state if the non-conformance is acceptable with the restrictions referenced on this concession, and if any further actions are required. | | | | | | | | Major/Minor | |
| Engineering/ Design authority must state if the non-conformance is acceptable with the restrictions referenced on this concession, and if any further actions are required. | | | | | Enter if the design authority is Customer, Ultra PCS, or TC Holder. | |
| **19. Approval of Application** (Deviation from Specification) | | | | | |  | |  | **20. Customer Acknowledgement of Notification**  (Used as directed by contract/ project quality plan where notification of change is required but not approval of the change details) | | | | | | | |
|  | | | | | |  | |  | (Strike through this section if not applicable) | | | | | | | |
|  | **PCS Design** | **PCS Quality** | | | | **Customer**  (Strike through this column if not applicable) | |  |  | | **Please complete and return to Ultra PCS** | | **Customer Comments (if applicable): -** | | | |
| **Name** |  |  | | | |  | |  | **Name** | |  | |
| **Signature** |  |  | | | |  | |  | **Signature** | |  | |
| **Date** |  |  | | | |  | |  | **Date** | |  | |
| **Accept/ Reject** | Accept/ Reject | Accept/ Reject | | | | Accept/ Reject | |  |  | |  | |