



Supplier Notice of Shipment of Nonconforming Product

Supplier Information		Part Information	
Company Name		Part Number	
Requestor Name		Part Name	
Requestor Email		Date Submitted	

Shipment Details			
Shipment Date	Shipment PO #	Total Quantity	Nonconforming Quantity
Total:			

Nonconformance Details	
Nonconformance Type	<input type="checkbox"/> Known <input type="checkbox"/> Suspected
Nonconformance Description (include sketch if necessary):	
Rework at Sur-Seal Possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Root Cause and Corrective Action Plan (must be submitted within 14 days)			
Has corrective action plan been implemented?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If not, by when?	

Conforming Shipment ID Method	
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Supplier Approvals			
Title	Name	Signature	Date
Quality Manager			
Plant Manager			