

**REQUEST FOR CHANGE, DEVIATION, WAIVER, or VARIANCE**

<b>1. PROGRAM NAME AND/OR NUMBER:</b>				
<b>2. CHANGE REQUEST NUMBER</b> <small>(see instructions for format):</small>	<b>3. SDRL NUMBER:</b> <input type="checkbox"/> N/A	<b>4. DATE SUBMITTED:</b>	<b>5. DATE RESPONSE NEEDED:</b>	
<b>6. ORIGINATOR /REQUESTOR -POC:</b>	<b>7. GD- POC:</b>	<b>8. Request Type</b> <input type="checkbox"/> CHANGE-RFC <input type="checkbox"/> DEVIATION-RFD <input type="checkbox"/> WAIVER-RFW <input type="checkbox"/> VARIANCE-RFV	<b>9. PRIORITY:</b> <input type="checkbox"/> HIGH <input type="checkbox"/> MEDIUM <input type="checkbox"/> NORMAL	<b>10. IN PRODUCTION:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
<b>11. TITLE OF CHANGE / DEVIATION / WAIVER / VARIANCE:</b>		<b>12. GENERAL DYNAMICS PO NO.:</b>		
<b>13. PART NUMBER AND PART NAME:</b>		<b>14. GD's CUSTOMER:</b>	<b>15. GD's CUSTOMER PO NO.:</b>	
<b>16. GD-OTS DRAWING(S) AFFECTED AND REVISION:</b> <input type="checkbox"/> N/A		<b>17. GD's CUSTOMER DRAWING(S) AFFECTED:</b> <input type="checkbox"/> N/A		
<b>18. DOCUMENT(S) AND/OR EQUIPMENT AFFECTED:</b> <input type="checkbox"/> N/A		<b>19. EFFECTIVITY (Lot number, serial number, PO #, date):</b>		
<b>20. DESCRIPTION OF CHANGE / DEVIATION / WAIVER / VARIANCE:</b>				
<b>21. REASON AND BENEFITS OF CHANGE / DEVIATION / WAIVER / VARIANCE:</b>				
<b>22. REQUIREMENT(S) FOR VALIDATION:</b> <input type="checkbox"/> N/A				
<b>23. OBJECTIVE EVIDENCE SUBMITTED FOR APPROVAL:</b> <input type="checkbox"/> N/A <input type="checkbox"/> SEE ATTACHED				
<b>24. SCHEDULE IMPACT:</b> <input type="checkbox"/> NO <input type="checkbox"/> YES (GO TO BLOCK 26)		<b>25. COST IMPACT :</b> <input type="checkbox"/> NO <input type="checkbox"/> YES (GO TO BLOCK 26)		
<b>26. COMMENT(S):</b> <input type="checkbox"/> N/A				
<b>27. ORIGINATOR SIGNATURE AND DATE</b> <input type="checkbox"/> N/A		<b>28. ORIGINATOR QUALITY SIGNATURE AND DATE</b> <input type="checkbox"/> N/A		
<b>Note – all signatures will designate that the request has been “APPROVED”; if rejected, then this will be documented by the individual in their appropriate box</b>				
<b>29. GD-OTS PROGRAM ENGINEERING SIGNATURE AND DATE</b>		<b>30. GD-OTS QUALITY ENGINEERING SIGNATURE AND DATE</b>		
<b>31. GD-OTS PROGRAM MANAGER SIGNATURE AND DATE</b>				
<b>32. APPROVAL/DISAPPROVAL COMMENTS:</b>				
<b>33. ICCB SIGNATURE (QUALIFIED AND CM CONTROLLED PRODUCTION ONLY) AND DATE</b>				

**Instructions:** The following Instructions define responsibilities and identify information that will be needed to complete the GD-OTS form.

- When you see (GD-OTS), this means the GD-OTS Program or Quality Engineer is responsible for entering the correct data in the appropriate block.
- When you see (Supplier), this means the Supplier or their Sub-tier suppliers are responsible for entering the correct data in the appropriate block.

**1. PROGRAM NAME AND/OR NUMBER:** If not know by the supplier, GD-OTS is responsible for entering the name of program as it appears on the customer contract and/or the job number. **Example: TGIF FRP3 Widget Assembly or #####**

**2. CHANGE REQUEST NUMBER (CRN):** The originator on block 6 is responsible for entering the CRN. This can be Alpha and or numeric, CRN's cannot be repeated; prefer same numbering scheme used for GD-OTS. The **originator** shall create a CRN Log that shall be made available when requested by GD-OTS. **When GD-OTS is the originator the number will be the 5 digit program number, two digit year, sequence number beginning with 001, request type, and supplier identifier such as Supplier Name/Abbrev/Number/CAGE Code. Example 00814-09-001\_RFW\_NCV.** GD-OTS CRN Logs shall be created and maintained in accordance with the program data management plan.

**3. SDRL NUMBER:** GD-OTS shall enter the correct data in this block when required. Check the N/A box when no action is required.

**4. DATE SUBMITTED:** The originator on block 6 shall enter the correct date in this block.

**5. DATE RESPONSE NEEDED:** The originator on block 6 shall enter the correct date in this block.

**6. ORIGINATOR / REQUESTOR:** Is the person responsible for entering the correct data in this block. This may be GD-OTS or Supplier.

The following Information is needed when filling out this block:

- Point Of Contact (POC):
- Company name:
- Company address:
- Phone number:
- Email address:

**7. GD:** Is the person you are sending the request to at GD.

The following Information is needed when filling out this block:

- Point Of Contact (POC):
- Phone number:
- Email address:

**8. Request Type:** The originator is responsible for checking the appropriate box. The following are definitions for Change, Deviation, and Waiver.

- Change is defined as anything that effects or could affect form, fit, or function, anything that would require supporting documentation to change revisions, any machine movements, or any process changes. The change requested is intended to be permanent.
- Deviation is when you want to request advance approval of a planned noncompliance.
- Waiver is when relief is requested for a noncompliance of existing hardware.
- Variance is typically the same as a waiver, but could be any of the requests above (more GD-Customer specific)

**9. PRIORITY:** The following defines how Normal, Medium, and High priorities are determined: The originator on block 6 is responsible for checking the appropriate box.

- Normal = 30 day notice
- Medium = 15 to 29 day notice
- High = 0 to 14 day notice

Note: Originator is encouraged to submit Normal turn time.

**10. IN PRODUCTION:** Means that the program is in production rather than in development. The originator is responsible for checking the appropriate box.

**11. TITLE OF CHANGE / DEVIATION / WAIVER:** The originator is responsible for entering a title that best describes the purposed RFC.

**12. GENERAL DYNAMICS P.O. N.O.:** The originator is responsible for entering the correct GD-OTS purchase order number in this block.

**13. Part Name and Number:** The originator is responsible for entering this data.

- 14. CUSTOMER:** GD-OTS will enter the customer's name in this block.
- 15. CUSTOMER P.O. NO.** GD-OTS will enter the customer's P.O. NO. in this block.
- 16. GD-OTS DRAWING(S) AFFECTED:** The originator will enter all drawing number(s) including revision(s) affected by the request. Check the N/A box when no action is required.
- 17. CUSTOMER DRAWING(S) AFFECTED:** GD-OTS will enter all customers drawing number(s) including revision(s) affected by the request. Check the N/A box when no action is required.
- 18. DOCUMENT(S) AND/OR EQUIPMENT AFFECTED:** The originator will enter all document(s) and/or equipment including revision(s) affected by the request. Examples could be, work instructions, travelers, routing sheets, control plans, procedures, manufacturing or quality plans and any other document(s); and machinery and equipment that will be affected by the request. Check the N/A box when no action is required.
- 19. EFFECTIVITY:** The originator will enter the effectivity by lot, serial number, date, etc. proposed for the RFC/RFD/RFW/RV.
- 20. DESCRIPTION OF CHANGE / DEVIATION / WAIVER / VARIANCE:** The originator will enter a detailed description of what is occurring in this block.
- 21. REASON AND BENEFITS OF CHANGE / DEVIATION / WAIVER / VARIANCE:** The originator will describe the reason and benefit(s) that will be gained from implementing the request in this block. *Avoid statements like "to meet schedule". This is a statement why this request does not affect product fit, form, or function.*
- 22. REQUIREMENTS FOR VALIDATION:** The originator will list all requirement(s) including revision(s) needed to validate the RFC/RFD/RFW/RV. Check the N/A box when no action is required.
- 23. OBJECTIVE EVIDENCE SUBMITTED FOR APPROVAL:** The originator will enter a detailed description of what objective evidence they will be submitting for review and approval. Examples could be but are not limited to the following:
- Dimensional Inspection Data
  - CMM Data
  - Certificates of Conformance
  - AS9102 First Article Inspection Data
  - Special Process C of C's
  - Material C of C's
  - Calibration Records or Certifications
  - MSDS'S
  - Certified Test / Laboratory Reports
  - Any other pertinent documentation needed to ensure compliance
- Note: Check the N/A box when no action is required. Check the SEE ATTACHED box when additional supporting documentation is required.
- 24. SCHEDULE IMPACT:** The originator will check the appropriate box. This block has the following options:
- Check the NO box when there will be no schedule impact.
  - Check the YES box (GO TO BLOCK 26), when there will be a schedule impact. When this occurs use block 26 to identify what the schedule impact will be.
- 25. COST IMPACT:** The originator will check the appropriate box. This block has the following options:
- Check the NO box when there will be no cost impact.
  - Check the YES box (GO TO BLOCK 26), when there will be a cost impact. When this occurs use block 26 to identify what the cost impact will be.
- 26. COMMENTS:** The originator will enter this data. Data entered shall always reference the block number it is associated with and will contain detailed information. Check the N/A box when no action is required.
- 27. ORIGINATOR SIGNATURE AND DATE:** The originator will sign and date in this block.
- 28. ORIGINATOR QUALITY SIGNATURE AND DATE:** The originator's Quality Engineer will sign and date their name in this block.
- 29. GD-OTS PROGRAM ENGINEERING SIGNATURE AND DATE:** The GD-OTS program engineer will review all data entered on the request. Check the appropriate approved or disapproved box and sign their name in the block provided.
- 30. GD-OTS QUALITY ENGINEERING SIGNATURE AND DATE:** The GD-OTS quality engineer will review all data entered on the document, sign, and date in the block provided.
- 31. GD-OTS PROGRAM MANAGER SIGNATURE AND DATE:** The GD-OTS program manager will review all data entered on the document, sign and date in block provided.

**32. APPROVAL / DISAPPROVAL COMMENTS:** This block may be used for comments.

**33. ICCB SIGNATURE (QUALIFIED AND CM CONTROLLED PRODUCTION ONLY):** This must go through the ICCB process if the program has been qualified (i.e. production program). Signature indicates the process was followed and accepted.

**Submittal Instruction Note:**

A copy of the signed form (scan) is to be submitted electronically or the original may be mailed to the buyer **AFTER deleting the instructions.**

The form needs to be emailed in the original electronic format to the following:

- The GD-OTS Purchasing Agent
- The Program Quality Engineer

The program team will review and provide disposition as soon as possible.

**Note: Areas shaded in gray will always be filled in by the GD-OTS Program or Quality Engineer**