|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| DATE PREPARED (1) | Cliquez ou appuyez ici pour entrer une date. | SUPPLIER REFERENCE (2) |  | GENERAL DYNAMICS REFERENCE NUMBER |  |
| DATE REQUIRED (3) | Cliquez ou appuyez ici pour entrer une date. | REQUEST REVISION (4) |  |
| **SUPPLIER INFORMATION** |
| SUPPLIER NAME (5) |  | SUPPLIER CODE(6) |  |
| SUPPLIER ADDRESS (7) |  |
| SUPPLIER REPESENTATIVE NAME (8) |  | PHONE (9) |  |
| EMAIL ADDRESS (10) |  |

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| **DISCREPANCY INFORMATION** |
| GENERAL DYNAMICS PART NUMBER (11) |  | REVISION (12) |  |
| PART DESCRIPTION (13) |  |
| DRAWING NUMBER (14) |  | REVISION (15) |  |
| PURCHASE ORDER (16) |  | LINE ITEM (17)  |  |
| LOT NUMBER (18) |  | QUANTITY AFFECTED (19)  |  |
| DOCUMENT DEFINING DEFECT (20) |  | REVISION (21) |  |
| DEFECT CLASSIFICATION (22) | Critical  [ ]  Major [ ]  Minor [ ]  Other [ ]  N/A [ ]  |
| PRODUCT STATUS (23) | Not started [ ]  In production [ ]  Completed [ ]  |
| **REQUIREMENT DESCRIPTION (24)** |
|       |
| **DISCREPANCY DESCRIPTION (25)** |
|       |
| ATTACHMENT  |  YES [ ]  |  NO [ ]  |  |
| **DISCREPANCY ROOT CAUSE (26)** | **IMMEDIATE AND CORRECTIVE ACTION (27)** |
|       |       |
| **GENERAL DYNAMICS SECTION** |
| RECOMMANDATION [ ]  | APPROVAL [ ]  | APPROVAL WITH MODIFICATION [ ]  | DISAPPROVAL [ ]  |
| GD-OTS CANADA QUALITY DEPARTEMENT APPROVAL | SIGNATURE |  | DATE | Cliquez ou appuyez ici pour entrer une date. |
| RECOMMANDATION [ ]  | APPROVAL [ ]  | APPROVAL WITH MODIFICATION [ ]  | DISAPPROVAL [ ]  |
| GD-OTS CANADA ENGINEERING DEPARTEMENT APPROVAL | SIGNATURE |  | DATE | Cliquez ou appuyez ici pour entrer une date. |
| GD-OTS CANADA COMMENTS      |

**Note : All numbered field are mandatory before submittal**

**Supplier Waiver / Deviation Request Instruction**

GD-OTS Canada supplier, to successfully submit a Waiver / Deviation request, you are required to fill out this form with all the mandatory fields and provide as much information as possible at time of submittal. If you need further assistance, please contact your Supplier Quality Assurance Representative.

|  |  |
| --- | --- |
| **Field #** | **Description** |
| 1 | Creation date of the non-conformance report |
| 2 | Supplier reference number |
| 3 | Date required for the waiver / deviation request |
| 4 | Request Revision, if multiples submission is required |
| 5 | Supplier Name: Identification of the supplier who is reporting the escape |
| 6 | General Dynamics supplier code |
| 7 | Address: Enter address of the identified supplier |
| 8 | Supplier Contact: Name of the supplier representative who is reporting the escape |
| 9 | Phone number of the supplier representative |
| 10 | Email address of the supplier representative |
| 11 | General Dynamics part number listed on purchase order / TDS |
| 12 | Revision level of General Dynamics part number |
| 13 | Part Description: Part name |
| 14 | Customer part number when applicable |
| 15 | Revision level of Customer part number |
| 16 | P.O. affected: Order number where the affected parts will be shipped. |
| 17 | Item number of the Purchase Order affected |
| 18 | S/N, Lot or ID number: Part serial number, batch number, lot number, identification number.If multiple lots involved, list lots number in discrepancy description section. |
| 19 | Quantity of affected parts. |
| 20 | Specified Requirement: Required dimension, characteristic, specification, process, etc |
| 21 | Revision level requirements document  |
| 22 | Defect Classification level |
| 23 | Status of the product involved |
| 24 | Description of the requirement (should be) |
| 25 | Description of the non-conformance; Actual part condition |
| 26 | Direct cause: Event(s), action(s) or condition(s) that directly resulted in the detected nonconformity or other undesirable situation that, if eliminated or mitigated, may prevented occurrence. |
| 27 | Immediate and corrective actions: Actions taken to eliminate/ prevent the cause of thenon-conformance. |