

A Division of Indian Head Industries, Inc.

NCQR NO. **NONCONFORMING QUALITY REPORT (SUPPLIER)** DATE QUANTITY RECEIVED: PART NAME PART NO. TYPE OF REJECTION: INTERNAL CUSTOMER RETURN SUPPLIER: TOTAL NCQR: SUPPLIER: LOCATION: GRN #: PART: DATE RECEIVED: PROBLEM: NO. OF CONTAINERS: LOT NO: MFG. DATE: TYPE OF DEFECT: NO FUNCTIONAL YES QUANTITY INSPECTED: DEFECTIVE FOUND: REV LEVEL: WRITTEN BY: QA MANAGER: OK **EMERGENCY** PLANT CONDITION QUANTITY ON HAND SUPPLIER NOTIFIED: YES DATE: SEND REJECTED SAMPLE YES SEND NCQR & EIGHT DISCIPLINE FORM TO SUPPLIER NO **DISPOSITION AUTHORIZATION** USE AS IS: DEVIATION #___ RETURN – QTY._____ SCRAP - QTY. ___ REWORK - QTY. _ SORT - QTY. _ OTHER APPROVALS FOR DISPOSITION DEPARTMENT DATE APPROVE DISAPPROVE COMMENTS PLANT MANAGER **QA MANAGER** COMMENTS: SORT / RETURN / REWORK LOG & COST **SCRAP** RETURN QTY. REJECTED QUANTITY REWORKED TOTAL HRS. X\$ 50.00 /HR \$ **QUANTITY SORTED TOTAL** HRS. X \$ 50.00 FREIGHT COST \$ ESTIMATED COMPLETION TIME /HRS. PARTS VALUE \$ ADMINISTRATIVE COST \$ SORTING SERVICE FEE

TOTAL CHARGE