

# Part Submission Warrant

309252

Part Name <u>CLUTCH HOUSING</u>		Cust. Part Number <u>250.0.3532.95</u>
Shown on Drawing No. <u>250.03532.20</u>		Org. Part Number _____
Engineering Change Level <u>250 / 4995</u>	Dated <u>22.03.2012</u>	
Additional Engineering Changes _____		Dated _____
Safety and/or Government Regulation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Purchase Order No. _____	Weight (kg) <u>9,268</u>
Checking Aid No. _____	Checking Aid Engineering Change Level _____	Dated _____
<b>ORGANIZATION MANUFACTURING INFORMATION</b>		<b>CUSTOMER SUBMITTAL INFORMATION</b>
<u>Druckguss Hof GmbH</u>		<u>GETRAG S.p.A</u>
Organization Name & Supplier/Vendor Code		Customer Name/Division
<u>Ferdinand - Porsche - Str. 8 - 11</u>		<u>Hr. Tränkle</u>
Street Address		Buyer/Buyer Code
<u>Hof</u>	<u>Bavaria</u>	<u>95028</u>
City	Region	Postal Code
		<u>DE</u>
		Country
		<u>DCT 250</u>
		Application
<b>MATERIALS REPORTING</b>		
Has customer-required Substances of Concern Information been reported? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a		
Submitted by IMDS or other customer format: _____		IMDS-No. _____
Are polymeric parts identified with appropriate ISO marking codes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> n/a		
<b>REASON FOR SUBMISSION (Check at least one)</b>		
<input type="checkbox"/> Initial Submission	<input type="checkbox"/> Change to Optional Construction or Material	
<input type="checkbox"/> Engineering Change(s)	<input type="checkbox"/> Supplier or Material Source Change	
<input checked="" type="checkbox"/> Tooling: Transfer, Replacement, Refurbishment, or additional	<input type="checkbox"/> Change in Part Processing	
<input type="checkbox"/> Correction of Discrepancy	<input type="checkbox"/> Parts Produced at Additional Location	
<input type="checkbox"/> Tooling Inactive > than 1 year	<input type="checkbox"/> Other - please specify below	
<b>REQUESTED SUBMISSION LEVEL (Check one)</b>		
<input type="checkbox"/> Level 1 - Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to customer.		
<input type="checkbox"/> Level 2 - Warrant with product samples and limited supporting data submitted to customer.		
<input type="checkbox"/> Level 3 - Warrant with product samples and complete supporting data submitted to customer.		
<input checked="" type="checkbox"/> Level 4 - Warrant and other requirements as defined by customer.		
<input type="checkbox"/> Level 5 - Warrant with product samples and complete supporting data reviewed at organization's manufacturing location.		
<b>SUBMISSION RESULTS</b>		
The results for <input checked="" type="checkbox"/> dimensional measurements <input checked="" type="checkbox"/> material and functional tests <input type="checkbox"/> appearance criteria <input type="checkbox"/> statistical process package		
These results meet all drawing and specification requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "NO" - Explanation Required)		
Mold / Cavity / Production Process <u>DIE-No. : 7103 / 02</u>		
<b>DECLARATION</b>		
I hereby affirm that the samples represented by this warrant are representative of our parts which were made by a process that meets all Production Part Approval Process Manual 4th Edition Requirements. I further affirm that these samples were produced at the production rate of <u>203 / 8</u> hours.		
I also certify that documented evidence of such compliance is on file and available for review. I have noted any deviations from the declaration below.		
EXPLANATION/COMMENTS: <u>Verlagerung Gießen und Strahlen nach DGHof / Bemusterung auf DGM Carat 2800</u>		
Is each Customer Tool properly tagged and numbered? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a		
Organization Authorized Signature <u>i.A. S. Söllner</u>		Date <u>17.09.2012</u>
Print Name <u>Th. Strunz</u>	Phone No. <u>09281 / 1440 566</u>	Fax No. <u>09281 / 1440 301</u>
Title <u>QML</u>	E-mail <u>t.strunz@dghof.de</u>	
<b>FOR CUSTOMER USE ONLY (IF APPLICABLE)</b>		
Part Warrant Disposition: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Other		
Customer Signature <u>i.A. M/S</u>		Date <u>17.09.2012</u>
Print Name <u>LIPS</u>	Customer Tracking Number (optional) <u>DEU-11-12-078</u>	