

310896



Quality Management  
System - Purchase Parts  
PPAP Results

Part number:	2500332113	Report Number:	15-01144
Part Name:	Clutch Housing	Previous PPAP:	-
Change Date:	03.04.2015	Transm. Type:	6DCT250
Change No.:	C_0831	Order number:	4500409264
Reason of Request:	New sampling		

Request Items	Required Score	Achieved Score
Degree of performance of design records	100	100
Degree of performance of engineering change documents	0	0
Degree of performance of engineering approval	0	0
Degree of performance of design FMEA	0	0
Degree of performance of process flow chart	100	100
Degree of performance of process FMEA	100	100
Degree of performance of dimensional results	100	100
Degree of performance of material test results	100	100
Degree of performance of performance test results	0	0
Degree of performance of process capability studies	100	25
Degree of performance of measurement system analysis	0	0
Degree of performance of qualified laboratory documentation	0	0
Degree of performance of control plan	100	100
Degree of performance of Part Submission Warrant (PSW)	100	100
Degree of performance of appearance approval results	0	0
Degree of performance of material requirements	0	0
Degree of performance of sample parts	100	75
Degree of performance of master parts	0	0
Degree of performance of specific inspection and production equipment	0	0
Degree of performance of IMDS registration	100	100
Degree of performance of contracts and standards	0	0
Degree of performance of other requirements	100	50
Degree of performance of GETRAG proprietary label	100	100
Degree of performance of signed team feasibility commitment	0	0
Degree of performance of subsupplier status	0	0
Degree of performance of APQP Status report	0	0

Achieved Score:	1050	Final Decision:	Interim Approved
Required Score:	1200	Closing Date:	01.03.2016
Total degree of perform.:	87.5 %	PPAP presentation date:	20.11.2015

Remarks:

Raw part No. 250.0.3321.91 / LA according the CAD DATASET 2015-03-03.  
2nd DIE at FVM. DIE number: 3.1 - LA. Purchase Order 4500387750. DIE and trimming tool.  
Casting without integrated trimming tool. Trimming on a separate workstation.  
Casted on the 2005 machine.

First sample were machined and assembled with a positive feedback.  
Conditions are:  
- fulfill of the documentation / - process validation on the next visit  
- validation of the modification (optimize casting and trimming)  
- 3rd machining result open (of the next 300pc sample parts)



GETRAG Getriebe- und Zahnradwerke  
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GETRAG InnovationsCenter  
Hermann-Hagenmeyer-Straße  
74199 Untergroupenbach

Name Buyer Traenkle, Juergen  
Copy to Buyer DEC1 Traenkle, Juergen

Name QS Golla, Adrian  
Copy to Plant GETRAG S.p.A.

# Part Submission Warrant

Part Name <u>CLIO CLUTCH HOUSING</u>		Cust. Part Number <u>250.0.3321.91</u>
Shown on Drawing No. <u>250.0.3321.13</u>		Org. Part Number <u>250.0.3321.13</u>
Engineering Change Level <u>A / C000831_CP_1</u>	Dated <u>03.04.2015</u>	
Additional Engineering Changes _____ Dated _____		
Safety and/or Government Regulation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Purchase Order No. <u>4500409264</u>	Weight (kg) <u>9,781</u>
Checking Aid No. _____	Checking Aid Engineering Change Level _____	Dated _____
<b>ORGANIZATION MANUFACTURING INFORMATION</b>		<b>CUSTOMER SUBMITTAL INFORMATION</b>
<u>FVM TECHNOLOGIES / 91023563</u>		<u>GETRAG</u>
Organization Name & Supplier/Vendor Code		Customer Name/Division
<u>ZI LES TREMBLES</u>		<u>Jurgle TRANKLE</u>
Street Address		Buyer/Buyer Code
<u>54920 VILLERS-LA-MONTAGNE (France)</u>		<u>250</u>
City	Region	Postal Code
		Country
		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: <u>544401653</u>		
Are polymeric parts identified with appropriate ISO marking codes? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a		
<b>REASON FOR SUBMISSION (Check at least one)</b>		
<input checked="" 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 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 checked="" type="checkbox"/> Level 3 - Warrant with product samples and complete supporting data submitted to customer.		
<input 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 checked="" type="checkbox"/> appearance criteria <input type="checkbox"/> statistical process package		
These results meet all drawing and specification requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No (If "NO" - Explanation Required)		
Mold / Cavity / Production Process <u>die LA 3.1</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>250 / 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>According to the CAD DATASET 2015-03-03</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>SL (FVM TECHNOLOGIES)</u>	Date <u>23.02.2016</u>
Print Name	<u>Sébastien LOPES</u>	Phone No. <u>+33.(0)3.82.44.86.46</u>
Title	<u>Quality department</u>	E-mail <u>s.lopes@groupearche.com</u>
<b>FOR CUSTOMER USE ONLY (IF APPLICABLE)</b>		
Part Warrant Disposition:	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input checked="" type="checkbox"/> Other <u>approved with conditions</u>	
Customer Signature	<u>A. Golla</u>	Date <u>01/03/2016</u>
Print Name	<u>Golla, Adrian</u>	Customer Tracking Number (optional) <u># 15-01144</u>

