

Supplier Change Request



Indicate if: Process Improvement Deviation Request

Control # :

Date Submitted:

Date Received:

Dana Part #:	Supplier Part #:	Change requested by: <input type="checkbox"/> Supplier <input type="checkbox"/> Dana <input type="checkbox"/> Both
Dana Facility:	Supplier Name:	
City, State/Province	City, State/Province	Form Instructions: Supplier: Forward this completed request to your Dana contact for internal processing. Dana: Review supplier's request then begin the Approval Tracking worksheet.
Dana Coordinator:	Supplier Contact:	
Contact Email:	Contact Email:	
Tel:	Tel:	
Fax:	Fax:	

Change Reason (check applicable and explain purpose for the change.)

Quality Improvement Environmental Cost Savings Deviation Request Other

Explain Reason: _____

Change Type and Description (Provide & List any Necessary Attachments, ie.. Marked Print):		Dana Only	
Type:	Attached Document?	Approve	Reject
<input type="checkbox"/> Process <input type="checkbox"/> Subcontractor <input type="checkbox"/> Dimensional <input type="checkbox"/> Raw Material <input type="checkbox"/> Appearance <input type="checkbox"/> Logistics <input type="checkbox"/> Packaging <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Effects: (Check all applicable, Attach detail where needed)		Cost Impact	
Yes / No	Document Attached	Current Cost	Proposed Cost
<input type="checkbox"/> Interchangeability	<input type="checkbox"/>		
<input type="checkbox"/> Stock at Dana (If yes, check disposition) <input type="checkbox"/> Use <input type="checkbox"/> Scrap <input type="checkbox"/> Rework	<input checked="" type="checkbox"/>		
<input type="checkbox"/> Shipping Schedule	<input type="checkbox"/>		
<input type="checkbox"/> Appearance, Quality, Function	<input type="checkbox"/>		
<input type="checkbox"/> Vehicle Assembly Operations	<input type="checkbox"/>		
<input type="checkbox"/> Weight	<input type="checkbox"/>		
<input type="checkbox"/> Tooling (change or move):	<input type="checkbox"/>		
<input type="checkbox"/> Safety / Regulatory Compliance:	<input type="checkbox"/>		
<input type="checkbox"/> Other:	<input type="checkbox"/>		
		Timing	
		Time required to incorporate change after Dana approval (days)?	
		If a Bank/Inventory is required, what is the quantity?	
		Estimated Annual Impact:	\$ -

Is a PPAP being submitted with this request? No ___ Yes ___ , Level:

Describe comparative testing done to validate this proposed change: _____

Total number of pages attached with this request (include all Change Type, Effects and PPAP documents indicated above): _____

Requestor Name & Title:	Signature	Date
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Dana Coordinator: Begin completion of the Approval Tracking and Internal Tracking Tabs in this spreadsheet. Once a decision to approve or decline has been made, sign and return this form to supplier.

Approved _____	Name & Title	Signature	Date
Declined _____			