



Supplier Deviation Request (SDR) Form

Please Complete Sections A, B, & C and Return to the Appropriate Conax Technologies Purchasing Representative

SECTION A - Supplier Information		SECTION B - Part Information				
Date:		Part Number:				
Supplier Name:		Description:				
Supplier Location:		Revision Level/Date:				
Contact Name:		PO No./ Line Item No.				
Phone No.:		Lot No. /DOM:				
E-Mail Address:		Lot Qty/Suspect Qty:				
SECTION C - Deviation Request (Place an "X" in applicable fields)						
<input type="checkbox"/>	Product Related	<input type="checkbox"/>	First Time	<input type="checkbox"/>	Permanent	
<input type="checkbox"/>	Process Related	<input type="checkbox"/>	Repeat	<input type="checkbox"/>	Temporary - Duration or Qty	
Current Requirement		Requested Deviation		Reason for Deviation		Qty
1						
2						
3						
4						
5						
SECTION D - Conax Disposition (To be completed by Conax)						
MRB Disposition	Deviation Qty (From Section C)					Totals
	1	2	3	4	5	
Unacceptable						
Use As Is						
Rework at Supplier						
Rework at Conax						
Approvals	Signature		Date	Comments		
Quality						
Engineering						
Purchasing						
SECTION E - Additional Actions Required (To be completed by Conax)						
Corrective Action Required?		Yes		No	CA No. _	
Drawing Change Required?		Yes		No	DR No.	
Customer Controlled?		Yes		No	If Yes, Attach Customer Approval	
Additional Comments/Location of Supporting Data (as applicable)						