

VMRR Number:			Date:						
This VMRR submittal	Vendor Material Review Request GKN Aerospace South Carolina Inc. (please check the box on the location associated with your PO)								
is applicable to:	348 Millennium Dr, Orangeburg SC 29115 USA Tel: 334-283-9500	174 Millennium Dr, (Phone: 334-283-9500	Orangeburg SC 29115 USA						
Vendor Name and	Address:	PO Number:							
		Line Item No.:							
		Buyer Name:							
		Page 1 of							
Vendor Quality Co	ntact:	Phone Number:							
		Part Name:							
Part Number(s):		Manufacture Date:							
Serial Number(s):	Custome	r NC Number(s):							
Quantity:									
	<u>Description / Sketch o</u>	of Discrepancy							
Immediate Action:		Corrective Action: (Obje	ctive evidence required)						
Root Cause:		Corrective Action Effectivity Date:							
		Corrective Action Follow-up:							
		Date of follow up/verification.							
		Signature:							
Reply / Instruction: (For GKN Aerospace Use Only)									
Quality:		Date:							
ME:		Date:							
Final Disposition:									



		Page 1 of _				
Vendor Material Review Request						
	Description / Sketch of Discrepancy					



Instructions for Completing F-PLN Vendor Material Review Request

Block Number

- 1. Leave blank to be completed by GKN Aerospace only.
- 2. Enter today's date.
- 3. Select the applicable GKN Aerospace location of the VMRR submittal.
- 4. Enter the vendor name and address.
- 5. Enter the Purchase Order Number, Receiver Item Number, and GKN Aerospace Buyer name.
- 6. Enter total number of page(s).
- 7. Enter your company Quality Controller contact.
- 8. Enter the Quality Controller contact phone number.
- 9. Enter part number.
- 10. Enter part name and the manufacture date.
- 11. Enter quantity and serial number of the discrepant part(s).
- 12. Enter Customer NC Number
- 13. Enter a detail description including the should be, and the as is condition and/or sketch of the discrepant area. (Use sheet 2 to continue description and/or include sketch if required)
- 14. Enter Immediate Action of the discrepancies taken (see response format).
- 15. Enter Root Cause (see response format).
- 16. Enter Corrective Action taken to prevent reoccurrence of the reported discrepancies. (See response format) Must submit objective evidence.
- 17. Enter Corrective Action Effective Date (See response format).
- 18. Enter Corrective Action Follow-up (see response format). Date of follow up/verification.
- 19. Sign form.
- 20. Leave blank to be completed by GKN Aerospace only (ME & QE Dispo).
- 21. Leave blank to be completed by GKN Aerospace only (ME & QE Sign).
- 22. Leave blank to be completed by GKN Aerospace only (ME & QE Date).
- 23. Enter total number of page(s).
- 24. Enter a detail description including the should be, and the as is condition and/or sketch of the discrepant area. (Use sheet 2 to continue description and/or include sketch if required)
 - > Please scan VMRR form and email to GKN Aerospace Purchasing Buyer.
 - > Then wait for GKN Aerospace disposition.



VMRR Number: 1						Date:	2					
Vendor Material Review Request												
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Vendor Name and			<u>PO N</u>		5	_						
4			Line	Item No.:	5							
				er Name: 5								
		Page			<mark>6</mark>							
Vendor Quality Cor	7	Phone Number: 8										
Dout Neverbow/s).			Part Name: 10									
Part Number(s):	9	Customor	Manufacture Date: 10									
Serial Number(s): Quantity: 11		11 <u>Customer</u>	ner NC Number(s): 12									
Quantity: 11		Description / Sketch o	f Disc	renancy								
		Description / Sketch o	71 DI3C	перапсу								
13												
Immediate Action:			Corrective Action: (Objective evidence required)									
14				16								
Root Cause:			Corrective Action Effectivity Date:									
	_	17										
	15	5	Corrective Action Follow-up:									
		Date of follow up/verification. 18										
			Signature:									
		Reply / Instruction: (For GKN			<u>')</u>							
Quality: ME:		Date:										
Final Disposition:												
		20										



Page 1 of_ **Vendor Material Review Request Description / Sketch of Discrepancy** 24



Response Format

Immediate Correction: Any action taken immediately upon identification of the potential noncompliance, such as rejection tags, line checks or supplier notification. This section should describe actions taken by the supplier to correct symptoms in the short term. The response should include when, where, how and by whom correction will be or has been made. Potential ramifications of findings should also be investigated and dealt with. For example if the finding is that out of date drawing and materials were found, the supplier should investigate and record whether any parts were made using drawings and materials, and what the disposition was affected parts.

Root Cause: The source or origin of the noncompliance, as well as any contributing factors involved. A finding is generally a symptom of a root cause problem. This section records the supplier's analysis of the finding to determine the root cause of the problem. A root cause is usually found in adequate procedures, processes, training, or in noncompliance (whether intentional or accidental) in one or more of these areas. Extensive analysis is called for in root cause identification. Detailed, in-depth questions should be asked, and AQS tools can be used to analyze results. If there is a management problem, it should be revealed.

<u>Corrective Action:</u> The remedial corrective action implemented to address the source or root cause of the noncompliance that will preclude recurrence. The response to root cause should, at a minimum, include changes to procedure, processes and/or training. Root cause correction involves long term prevention and process improvement rather than an immediate fix.

Must submit objective evidence.

Corrective Action Effective Date: Date when corrective action becomes effective.

<u>Corrective Action Follow-up:</u> This section indicates that the supplier has verified or will verify (who, where, when, how) that root cause corrections have been accomplished.

Date of follow up / verification.

