

DAIMLER Chrysler



### Part Submission Warrant

Part Name D472 4Way Mech Cust. Part Number BE93-74610A60-BC  
 Shown on Drawing No. BE93-74610A60-BC Orig Part Number BE93-74610A60-BC  
 Engineering Change Level Rel Dated 3-Sep-10  
 Additional Engineering Changes N/A Dated N/A  
 Safety and/or Government Regulation  Yes  No Purchase Order No. \_\_\_\_\_ Weight (kg) 0.8068  
 Checking Aid No. \_\_\_\_\_ Checking Aid Engineering Change Level \_\_\_\_\_ Dated \_\_\_\_\_

#### ORGANIZATION MANUFACTURING INFORMATION

#### CUSTOMER SUBMITTAL INFORMATION

Windsor Machine & Stamping (2009) Ltd (G&R 3)  
 Organization Name & Supplier/Vendor Code  
7085 Smith Industrial Drive  
 Street Address  
McGregor, Ontario NOR 1J0 Canada  
 City Region Postal Code Country

Intier / Mississauga  
 Customer Name / Division  
 Buyer / Buyer Code  
D472 4Way Front Row 4 Way  
 Application

#### MATERIALS REPORTING

Has customer-required Substance of Concern information been reported?  Yes  No  n/a

Submitted by IMDS or other Customer format: 157165761

Are polymeric parts identified with appropriate ISO marking codes?  Yes  No  n/a

#### REASON FOR SUBMISSION (Check at least one)

- Initial Submission
- Engineering Change(s)
- Tooling: Transfer, Replacement, Refurbishment, or Additional
- Correction of Discrepancy
- Tooling Inactive > than 1 year
- Change to Optional Construction or Material
- Supplier or Material Source Change
- Change in Part Processing
- Parts Produced at Additional Location
- Other-please specify below

#### REQUESTED SUBMISSION LEVEL(Check one)

- Level 1 - Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to customer
- Level 2 - Warrant with product samples and limited supporting data submitted to customer.
- Level 3 - Warrant with product samples and complete supporting data submitted to customer
- Level 4 - Warrant and other requirements as defined by customer.
- Level 5 - Warrant with product samples and complete supporting data reviewed at organization's manufacturing location.

#### SUBMISSION RESULTS

The results for  dimensional measurements  material & functional tests  appearance criteria  statistical process package

These results meet all drawing record requirements:  Yes  No (if "NO" Explanation Required)

Mold / Cavity / Production Process Foam and H/R Mech

#### DECLARATION

I 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 \_\_\_\_\_ / 8 hours. I also certify that documented evidence of such compliance is on file and available for review. I have noted any deviations from this declaration below.

EXPLANATION/COMMENTS: NEW SUPPLIER

Is each Customer Tool Properly tagged and numbered?  Yes  No  n/a

Organization Authorized Signature: [Signature] Date 3-Dec-12

Print Name Simon Cheng Phone No 519-726-4010 FAX No 516-726-5368

Title Quality Manager E-mail scheng@windsormachine.com

#### FOR CUSTOMER USE ONLY ( IF APPLICABLE)

PPAP Warrant Disposition:  Approved  Rejected  Other Interim for Today's

Customer Signature [Signature] Date: Apr/22/2013

Print Name To Sellouah Customer Tracking Number (Optional) \_\_\_\_\_



DAIMLER Chrysler



# Part Submission Warrant

Part Name <u>U388 4 Way H/R Asm</u>		Cust. Part Number <u>CA13-74610A60-AD</u>	
Shown on Drawing No. <u>CA13-74610A60-AD</u>		Orig Part Number <u>CA13-74610A60-AD</u>	
Engineering Change Level <u>3</u>		Dated <u>14-May-12</u>	
Additional Engineering Changes <u>N/A</u>		Dated <u>N/A</u>	
Safety and/or Government Regulation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Purchase Order No. _____ Weight (kg) <u>0.94292</u>	
Checking Aid No. _____		Checking Aid Engineering Change Level _____ Dated _____	
<b>ORGANIZATION MANUFACTURING INFORMATION</b>		<b>CUSTOMER SUBMITTAL INFORMATION</b>	
<u>Windsor Machine &amp; S (2009) G&amp;R Cold F P#3</u>		<u>Intier Magna</u>	
Organization Name & Supplier/Vendor Code <u>7085 Smith Industrial Drive</u>		Customer Name / Division	
Street Address <u>McGregor, Ontario NOR 1J0 Canada</u>		Buyer / Buyer Code <u>U388</u>	
City	Region	Postal Code	Country
<b>MATERIALS REPORTING</b>			
Has customer-required Substance 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>IMDS ID# 174475882</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 type="checkbox"/>	Initial Submission	<input type="checkbox"/>	Change to Optional Construction or Material
<input type="checkbox"/>	Engineering Change(s)	<input checked="" 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 & functional tests <input type="checkbox"/> appearance criteria <input checked="" type="checkbox"/> statistical process package			
These results meet all drawing record requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "NO" Explanation Required)			
Mold / Cavity / Production Process _____			
<b>DECLARATION</b>			
I 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>130 / 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 this declaration below.			
EXPLANATION/COMMENTS: <u>NEW SUPPLIER</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>Simon Cheng</i></u>		Date <u>December 3, 2012</u>	
Print Name <u>Simon Cheng</u>	Phone No <u>519-726-4010</u>	FAX No <u>519-726-5368</u>	
Title <u>Quality Manager</u>	E-mail <u>scheng@windsormachine.com</u>		
<b>FOR CUSTOMER USE ONLY ( IF APPLICABLE)</b>			
PPAP Warrant Disposition: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input checked="" type="checkbox"/> Other <u>Interim for 60 days</u>			
Customer Signature <u><i>T. Sellaiash</i></u>		Date: <u>Apr/22/2013</u>	
Print Name <u>T. Sellaiash</u>	Customer Tracking Number (Optional) _____		

DAIMLER Chrysler



**Part Submission Warrant**

Part Name <u>U387 4 Way H/R Asm</u>		Cust. Part Number <u>CT43-74610A60-AB</u>	
Shown on Drawing No. <u>CT43-74610A60-AB</u>		Orig Part Number <u>CT43-74610A60-AB</u>	
Engineering Change Level <u>2</u>		Dated <u>26-Apr-12</u>	
Additional Engineering Changes <u>PCN 33359</u>		Dated <u>N/A</u>	
Safety and/or Government Regulation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Purchase Order No. _____ Weight (kg) <u>0.88692</u>	
Checking Aid No. _____		Checking Aid Engineering Change Level _____ Dated _____	
<b>ORGANIZATION MANUFACTURING INFORMATION</b>		<b>CUSTOMER SUBMITTAL INFORMATION</b>	
<u>Windsor Machine &amp; S (2009) G&amp;R Cold F P#3</u>		<u>Intier Magna</u>	
Organization Name & Supplier/Vendor Code <u>7085 Smith Industrial Drive</u>		Customer Name / Division	
Street Address <u>McGregor, Ontario N0R 1J0 Canada</u>		Buyer / Buyer Code <u>U387</u>	
City	Region	Postal Code	Country
<b>MATERIALS REPORTING</b>			
Has customer-required Substance 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>IMDS ID#173511525</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 type="checkbox"/>	Initial Submission	<input type="checkbox"/>	Change to Optional Construction or Material
<input type="checkbox"/>	Engineering Change(s)	<input checked="" 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 & functional tests <input type="checkbox"/> appearance criteria <input checked="" type="checkbox"/> statistical process package			
These results meet all drawing record requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "NO" Explanation Required)			
Mold / Cavity / Production Process _____			
<b>DECLARATION</b>			
I 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 103 / 1 hours. I also certify that documented evidence of such compliance is on file and available for review. I have noted any deviations from this declaration below.			
EXPLANATION/COMMENTS:		<u>NEW SUPPLIER</u>	
Is each Customer Tool Properly lagged and numbered? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a			
Organization Authorized Signature: <u><i>Simon Cheng</i></u>		Date <u>December 3, 2012</u>	
Print Name <u>Simon Cheng</u>	Phone No <u>519-726-4010</u>	FAX No <u>519-726-5368</u>	
Title <u>Quality Manager</u>	E-mail <u>scheng@windsormachine.com</u>		
<b>FOR CUSTOMER USE ONLY ( IF APPLICABLE)</b>			
PPAP Warrant Disposition: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input checked="" type="checkbox"/> Other <u>Interim for 60 days</u>			
Customer Signature <u><i>T. Sellayah</i></u>		Date <u>Apr 22/2012</u>	
Print Name <u>T. Sellayah</u>	Customer Tracking Number (Optional) _____		