



Phase and submission type  
 Phase 1  Phase 2  Phase 3  Interim (Non-PPAP)

## PPAP Submission Warrant

**PART INFORMATION**

Part Name C346 1R 4 W HR ASM Cust. Part Number CM51-A612A18-UAW (2375654)  
 Shown on Drawing Number 2375654 Organization Part Number 2375654  
 Engineering Change Level REL Dated 12/14/2011  
 Additional Engineering Changes \_\_\_\_\_ Dated \_\_\_\_\_  
 Safety and/or Government Regulation  Yes  No Purchase Order No. T937817 Weight (kg) 0.8336  
 Checking Aid Number 14437 Checking Aid Engineering Change Level REL Dated 12-Mar-12

**ORGANIZATION MANUFACTURING INFORMATION**  
Windsor Machine & Stamping (US) Ltd  
 Organization Name and Supplier/vendor Code \_\_\_\_\_  
26655 Northline Road  
 Street Address \_\_\_\_\_  
Taylor MI 48180 US  
 City Region Postal code Country

**CUSTOMER SUBMITTAL INFORMATION**  
JCI  
 Customer Name/Division \_\_\_\_\_  
Marisa Pappalardo  
 Buyer/Buyer Code \_\_\_\_\_  
MY2013 Focus  
 Application \_\_\_\_\_

**MATERIALS REPORTING**

Has customer-required Substances of Concern information been reported?  Yes  No

Submitted by IMDS or other customer format: 227826903

If submitted by IMDS, enter Module ID number, version and date transmitted 227826903

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

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

<input 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 checked="" 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

**REQUESTED SUBMISSION LEVEL (Select one)** New Tool

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 supplier's manufacturing location.

**SUBMISSION RESULTS**

The results for  dimensional measurements,  material and functional tests  appearance criteria  statistical process package  
 These results meet all design requirements  Yes  No (If "No" - Explanation Required)

**DECLARATION**

I affirm that the samples represented by this warrant are representative of our parts which were made by a process which meets all Production Part Approval Process Manual 4th Edition requirements including all Ford-specific requirements. I further affirm that these samples were produced at the production rate of 2960 / 16 hours using 1 production streams. I also certify that documented evidence of such compliance is on file and is available for review. I have noted any exceptions from this declaration below.

**EXPLANATION/COMMENTS** Tool order number T937817 dual cavity tool

Organization Authorized Signature Brad Pine Print Name Brad Pine Date 15-Mar-13  
 Title Quality Manager Phone No. 734-941-7320 Fax: 734-941-6208 Email bpine@windsormachine.com

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

**Capacity Requirements**

Source of the Program Approval requirements SAL (Sourcing Agreement Letter) Detail / Date 10-Apr-12  
 Program Approval (<PA>) Requirements APW 15000 MPW 17250  
 If Program Approval (<PA>) requirements are not met, indicate date when the requirements will be met Date \_\_\_\_\_

Source of the revised requirements after <PA> \_\_\_\_\_ Detail / Date \_\_\_\_\_  
 Revised requirements after <PA> APW \_\_\_\_\_ MPW \_\_\_\_\_  
 If the revised requirements after <PA> are not met, indicate date when the requirements will be met Date \_\_\_\_\_

**Demonstrated Capacity (recorded in Ford Capacity System (GCP or MCPV) as Purchased Part Capacity)**  
 Enter Capacity Analysis Report "Predicted Good Parts per Week" APW, MPW and date APW 15000 MPW 17250 Date 10-Apr-12

**FOR FORD USE ONLY**

PPAP Non-PPAP<sup>a/</sup>

Phased PPAP Warrant Status:  Approved  Rejected  Interim Accepted

Signature <sup>a/</sup>	<u>[Signature]</u>	Name	<u>Stanley Singer III</u>
Date	<u>15-Mar-13</u>	e-mail	<u>ssinger1@ford.com</u>
P.D. Signature <sup>b/</sup>		Name	
Date		e-mail	

a/ Non-PPAP indicates the part does not satisfy one or more PPAP requirements and is incomplete  
 b/ P.D. signature for Priority suppliers on GPDS programs

**Interim Status**  
 (to be completed by the Organization)

Engineering Authorization Alert or Alert Report

Description: \_\_\_\_\_  
 (Incomplete PPAP Requirements) \_\_\_\_\_  
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