**Reduced Inspection**

|  |  |
| --- | --- |
| Sender |  |
|       |  |
|       |  |
|       |  | **Reason** |
|       |  | [ ]  Production freeze exceeding 3 years |
|  |  | [ ]  Part family inspection with reference after consultation\* |
| Recipient |  |
| MTU Friedrichshafen GmbH |  |
| Wareneingangsprüfung |  |
|  |  |
| 88040 Friedrichshafen | \* Inital sample approval according to MTQ 5003: |
|  | Mat.-No.:.  |       |
|  | Date:  |       |
|  |
| **Supplier/Production plant::**  | **Customer:**  |
|  |  |
| **Report No.:**  |  | **Report No.:**  |  |
| Description: |       | Description: |       |
| Material number: |       | Material number: |       |
| Drawing No.: |       | Drawing No.: |       |
| Status/Date: |       | Status/Date: |       |
| **Delivery note no. / Date::** |  |  |  |
| Delivery quantity: |        |  |  |
| Batch number: |       |  |  |
| Sample weight: |       |  |  |
|  |  |  |  |
| **Supplier confirmation** |
| 01  | The material corresponds to specifications (analysis, purity, homogeneity, strength, etc. ) |
| 02 | The machinery, devices, tools, pattern equipment and core boxes used have not changed since the last production series which was delivered. |
| 03 | The machinery, devices, tools, pattern equipment and core boxes were properly stored and are in perfect condition. |
| 04 | The change status of devices, tools, pattern equipment and core boxes corresponds to the change status currently registered. |
| 05 | Any faults which were the subject of complaints regarding previous deliveries have been permanently corrected. |
| 06 | With respect to dimensions, cleanness, surface properties and function, the newly manufactured parts display no irregularities and meet the specifications. |
| Name: |       | Remarks: |
| Dept: |       |       |
| Phone: |       |  |
| Fax: |       |  |
| E-Mail: |       |  |
|  |  |  |
| Date:       | Signature: |  |
|  |  |  |  |
| **Customer decision** | **Overall** | Remarks:      |
| **Approved** | [ ]  |  |
| **Approved with conditions, re-sampling required** | [ ]  |  |
| **Rejected, re-sampling required** | [ ]  |  |
|  |  |  |
| Name: |       |  |
| Dept.: |       |  |
| Phone: |       |  |
| Fax: |       |  |
| E-Mail: |       | Date:       | Signature: |

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| --- | --- | --- | --- | --- |
| **Product-related test results** | Status |       | / Date |       |

|  |  |
| --- | --- |
| [ ]  01 Dimensional check[ ]  02 Function check[ ]  03 Material test[ ]  04 Haptics test[ ]  05 Acoustics test | [ ]  06 Odors test[ ]  07 Visual test[ ]  08 Surface test[ ]  09 EMC test[ ]  10 Reliability test |
|  |  |  |
| **Supplier / production plant:** | **Customer:** |
|       |  |
| Test report no.:       | Index:      | Test report no.:       | Index:      |
| Description: |       | Description: |       |
| Item number: |       | Item number: |       |
| Drawing number: |       | Drawing number: |       |
| Status / Date: |       | Status / Date: |       |
|  |  |  |
| Ref.-No. | Requirements Specification | Actual values Supplier | Specification fulfilled | Remarks |
|  |  |  | Yes | No |  |
|       |       |       |      |      |       |
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|  |
| **Supplier confirmation:** | **Customer decision:** |
| Remarks:       | **Approved** | [ ]  |
|  | **Approved with conditions, re-sampling required** | **[ ]**  |
|  | **Rejected, re-sampling required** | [ ]  |
|  | Remarks:       |
| Name: |       | Name: |       |
| Dept.: |       | Dept: |       |
| Phone: |       | Phone: |       |
| Fax: |       | Fax: |       |
| E-Mail: |       | E-Mail: |       |
|  |  |  |  |
| Date | Signature | Date | Signature |