



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: 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. _____ Weight (kg) _____

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
 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)

Initial submission Change to Optional Construction or Material

Engineering Change(s) Supplier or Material Source Change

Tooling: Transfer, Replacement, Refurbishment, or additional Change in Part Processing

Correction of Discrepancy Parts produced at Additional Location

Tooling Inactive > than 1 year Other - please specify below

REQUESTED SUBMISSION LEVEL (Select 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 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)

Mold / Cavity / Production Process(es): _____

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

Organization Authorized Signature: Beth Muse Print Name: Beth Muse Date: 13-Mar-12

Title: Quality Manager Phone No: 734-941-7320 Fax: 734-941-6208 Email: bmuse@windsormachine.com

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

Capacity Requirements

Source of the Program Approval requirements: _____ Detail / Date: _____

Program Approval (<PA>) Requirements: APW: _____ MPW: _____ Date: _____

If Program Approval (<PA>) requirements are not met, indicate date when the requirements will be met: _____

Source of the revised requirements after <PA>: GCP & STUDY 2402 Detail / Date: GCP & STUDY 2402

Revised requirements after <PA>: APW: 12,640 MPW: 14,120 Date: _____

If the revised requirements after <PA> are not met, indicate date when the requirements will be met: _____

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: _____ MPW: _____ Date: _____

FOR FORD USE ONLY

PPAP		Non-PPAP*	
Phased PPAP Warrant Status:	<input checked="" type="radio"/> Approved	<input type="radio"/> Rejected	<input type="radio"/> Interim Accepted
STA Signature	<u>E Tower</u>	Name	<u>EVERETTE TOWER</u>
Date	<u>4/2/2012</u>	e-mail	<u>etower@FORD.com</u>
P.D. Signature ^{1b}		Name	
Date		e-mail	

1a Non-PPAP indicates the part does not satisfy one or more PPAP requirements and is incomplete
 1b P.D. signature for Priority suppliers on QPUS programs

Interim Status
(to be completed by the Organization)

Engineering Authorization: Alert or Alert Report

Description: (Incomplete PPAP Requirements) _____