



Phase 2 Submission Type: Phase 1 Phase 2 Phase 3 Interim (Non-PPAP) **PPAP Submission Warrant**

PART INFORMATION

Part Name D385 4-WAY H/R ASM Cust. Part Number CA5A-96611E24-AD
 Shown on Drawing Number CA5A-96611E24-A Organization Part Number CA5A-98811E24-AD
 Engineering Change Level 5 Dated 3-Jul-12
 Additional Engineering Changes C12016886 Dated 5-Apr-12
 Safety and/or Government Regulation Yes No Purchase Order No. _____ Weight (kg) 1.0356
 Checking Aid Number _____ Checking Aid Engineering Change Level _____ Dated _____

ORGANIZATION MANUFACTURING INFORMATION
 Windsor Machine & Stamping (US) Ltd
 Organization Name and Supplier/Vendor Code _____
 26855 Northline Road
 Street Address _____
 Taylor MI 48180 U.S.
 City Region Postal code Country

CUSTOMER SUBMITTAL INFORMATION
 Lear Hammond
 Customer Name/Division _____
 Peter Brown
 Buyer/Buyer Code _____
 D385 Headrest
 Application _____

MATERIALS REPORTING

Has customer-required Substances of Concern information been reported? Yes No
 Submitted by IMDS or other customer format: _____
 If submitted by IMDS, enter Module ID number, version and date transmitted: 182147803 / 0.01

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) Center post to post dimension change from 170 to 160 mm

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 2400 / 18 hours using _____ 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 Center post to post dimension change from 170 to 160 mm

Organization Authorized Signature Brad Pine Print Name Brad Pine Date 28-Jul-12
 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 _____
 Program Approval (<PA>) Requirements APW 600 MPW 600
 If Program Approval (<PA>) requirements are not met, indicate date when the requirements will be met Date 10-Apr-12

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 _____ MPW _____ Date _____

FOR FORD USE ONLY

PPAP Non-PPAPSM

Phase 2 PPAP Warrant Status: Approved Rejected Interim Accepted

Signature	Name	Signature	Name
<u>[Signature]</u>	<u>P. Brown</u>	<u>[Signature]</u>	<u>P. Brown</u>
Date	e-mail	Date	e-mail
<u>7/30/12</u>	<u>[Email]</u>	<u>7/30/12</u>	<u>[Email]</u>
P.O. Signature	Name	P.O. Signature	Name
<u>[Signature]</u>	<u>[Name]</u>	<u>[Signature]</u>	<u>[Name]</u>
Date	e-mail	Date	e-mail
<u>[Date]</u>	<u>[Email]</u>	<u>[Date]</u>	<u>[Email]</u>

Interim Status (to be completed by the Organization)

Engineering Authorization Alert or Alert Report

Description: (Incomplete PPAP Requirements) _____