TIMKEN

SUPPLIER PRODUCT/PROCESS CHANGE REQUEST FORM

Supplier Name: _____ Address: _____ Date: _____

Part Number: _____ Part Description: _____

Dwg No./Rev. _____ Quantity: _____

GQTS #_____

Request Type (circle) **Process**   **Design**   **Source**   **Eng. Change**   **Deviation (Temporary Only)**

Duration: (circle)   **Permanent**   **Temporary**

Supplier Requester: _____ Phone: _____ Fax: _____

Description of Current Process, Design, or Specification: _____
_____
_____
_____
_____
_____
_____

Reason for Change and Description of Proposed Process, Design, or Specification: _____
_____
_____
_____
_____**** NOTE: Attach Commercial Detail if affected by change.**
_____**** NOTE: Attach 8-D if non-conformity exists.**

Timing to phase-in change: _____   **** NOTE: Attach proposed project plan.**

Validation Procedure/Description: Current FMEA RPN# _____   Potential FMEA RPN# _____
                                       Current CR _____ Cpk _____   Potential CR _____ Cpk _____
_____
_____
_____
_____

TIMKEN/SUPPLIER APPROVALS ROUTING

Supplier

Engineering	Date: _____	Initials: _____	Plant Mfg/User	Date: _____	Initials: _____
Quality	Date: _____	Initials: _____	Purchasing	Date: _____	Initials: _____

Timken Mandatory

Quality	Date: _____	Initials: _____	Purchasing	Date: _____	Initials: _____

Timken Optional

			Sales	Date: _____	Initials: _____
Prod/Prog Mgmt	Date: _____	Initials: _____	Other_____	Date: _____	Initials: _____

PROCESS CHANGE REQUEST RESULTS

APPROVED (   )   **ENG. DEVIATION NO. (If Applicable)** _____

DENIED   (   )

PPAP REQ'D ___YES ___NO

LEVEL: I   II   III   IV   V

SAFE LAUNCH REQUIRED   YES _____NO _____

EFFECTIVE DATE: _____   **EFFECTIVE SERIAL/LOT #:** _____

TIMKEN SQA ASSOCIATE: _____   **DATE:** _____

QUESTIONS?
Contact
SQD Department
The Timken Company
GCH-11
1835 Dueber Ave. SW
Canton OH 44706

FORM: F-PR-74006-COR
Rev 7
4-11-2010 SAR