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| **Requester Section** |
| **Part Information** | **Internal Leviton Use** |
| **Leviton Item/Assy No.:** |       | **Revision:**       | **Deviation No.:** |  |
| **Description:** |       |  |  |
| **Supplier Information** | **Purchase Order Information** |
| **Supplier (Company Name)** | **Supplier No.** | **Purchase Order** | **Line Item No.** |
|  |       |       |       |
| **Supplier Point of Contact:** | **Title:** | **Quantity** | **Due Date** |
|       |       |       |       |
| **Email address:** | **Phone No.:** | **Leviton Buyer** | **Plant** |
|       |       |       |       |
| **Deviation Request Details** |
| **Quantity Nonconforming:** |       | **Batch/Lot #** (if applicable)**:** |       |
| **Request Type:** | Deviation [ ]  |  |
| **Leviton Requirement** (include drawing zone and other descriptions as necessary. Attach sketch, photos, or extra pages as required): |
|       |
| **Description of Nonconformance** (Attach sketch, photos, or extra pages as required): |
|       |
| **Description of Root Cause:** | **Description of Corrective Action:** |
|       |       |
| **Corrective Action Effectivity:**  |
| ***Disposition and Approvals (to be completed by Leviton)*** |
| **Approved as Requested** | [ ]  | **Approved with Disposition Notes** | [ ]  | **Rejected (see notes)** | [ ]  | **Charge to Supplier Rating** | [ ]  |
| ***Disposition Notes*** |
|       |
| ***Disposition Approval Signatures*** |
| **Supplier Quality** | **BU Quality** | **Manufacturing or Product Manager** | **Engineering** |
|       |       |       |       |
| Date:       | Date:       | Date:       | Date:       |

**Form Instructions**

This form must be used by Suppliers to request a deviation from Leviton on Purchase Order requirements that have not or cannot be achieved by the Supplier. Please note that material shipped against an approved Deviation. The Supplier must complete all the necessary form fields and submit to their Leviton Sourcing Representative.

**A COPY OF THIS APPROVED FORM MUST BE INCLUDED WITH EACH SHIPMENT**

|  |  |
| --- | --- |
| Leviton Item/Assy No. | Item or assembly number impacted by this request |
| Revision | Item or assembly revision |
| Description | Item or assembly description as it appears on the drawing/purchase order/specification |
| Deviation No. | Tracking number assigned by Leviton (Supplier leave blank) |
| Supplier (Company Name) | Enter the name of your company |
| Supplier No | Enter the Leviton code for you company as found on your Purchase order |
| Supplier Point of Contact | Name of supplier representative responsible for the subject request |
| Title | Title of the supplier representative |
| Email address | Supplier contact email address |
| Phone No. | Supplier contact phone number (including area code and country code) |
| Purchase Order | Purchase order associated with the nonconforming parts |
| Line item No. | Purchase order line item associated with the nonconforming parts |
| Quantity | Purchase order quantity |
| Due Date | Due date for the impacted items |
| Plant | Leviton Plant or Ship-To address as identified on the Purchase Order  |
| Buyer phone | Leviton Buyers phone number |
| Quantity nonconforming | Total quantity impacted by the nonconformance |
| Bath/Lot | Batch or Lot numbers associated with the nonconformance (if applicable) |
| Request Type | Specify the type of request being submitted* **Deviation:** Supplier request approval to deviate from a Purchase Order requirement
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| Leviton Requirement | Specify the Leviton requirement(s) that are the subject of the request. Include drawing numbers, drawing characteristics and dimensions (with tolerance), specifications, and any other information required to define the Leviton requirements |
| Description of Nonconformance | Describe in detail the details of the nonconformance. If possible, provide technical substantiation as to why the nonconformance is acceptable. Include how many units impact, serial numbers, lots, etc. |
| Description of Root Cause | Enter the underlying cause of the nonconformance |
| Description of Corrective Action | Complete describe the measures take to correct and eliminate the likelihood of recurrence |
| Corrective Action Effectivity | Date the corrective action will take effect |
| Disposition Approval | Leviton response to the request* **Approved as Requested:** Supplier may proceed as requested
* **Approved with Disposition Notes:** Supplier may proceed in accordance with the disposition notes from Leviton
* **Rejected:** Supplier request is rejected as specified in the Disposition notes
* **Charge to Supplier Rating:** Supplier is advised that material shipped against this request, even if approved, will be charged against he Supplier’s rating as nonconforming material.
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| Disposition Notes | Notes from the Leviton team that support the decision making process and clarify the disposition |
| Disposition Approval Signatures | Leviton approval signatures |