| To be completed by coordinator  Full problem solving (e.g., 8D)  Reduced problem solving (root cause investigation and corrective actions)  No problem solving required | | | | | Concession № |
| --- | --- | --- | --- | --- | --- |
| Coordinator:    Tel:    Fax:    E-mail: | Supplier code:    Supplier name:    Contact name:    Tel:  Fax:  E-mail: | | | | Related notification №’s. |
| Vendor NC Reference № |
| Date CON issued: |
| Order № |
| KM Part № | Supplier Part No. | | Serial / Batch No. | | Quantity |
| Description: | | | | | KM NC reference: |
| Description of Non-conformity (Define) or requested deviation and proposal for repair/rework: | | | | | |
| AREA/CELLS FOR DECISION | | | | | |
| Accepted | | | | Estimated cost of repair: | |
| To be repaired by customer  To be returned to the supplier for repairs  Repaired by supplier prior to delivery  Rejected | | | | Back after repair:    Expected delivery time    New delivery time: | |
|  | | | |  | |
|  | | | |  | |
| Comment: | | | |  | |
| | Design Non-Conformance Authority acceptance | Date: | Signature: | | --- | --- | --- | | | | | | |
| Supplier is also requested to answer the 8D-Report in order to describe the measures taken in order to eliminate the cause for this non-conformity. The non-conformity will not be closed until both documents have been received. | | | | | |
| Latest date of reply for Concession report (CON): | | | | | |
| Latest date of reply for 8D-Report: | | | | | |
| Supplier’s acceptance | | Date: | | Signature: | |