

QA.DEPT

Reg No : 168/NQR/II/2024

Issued Date : February 04, 2024
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Receiv.No :12
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Supplier Name	Part Name	Part No	PO No	Rev	Revision Item	Date	Dept.Head	Sect.Head	Foreman
			8881				28-02-2024 11:11 admin	28-02-2024 11:11 admin	28-02-2024 11:11 admin
Search of problem :		<input checked="" type="checkbox"/> Claim: <input type="checkbox"/> Complaint[Information]	Delivery Date Feb 04'2024						
(Detail attached)		location Claim occur	Disposition of inventory			Claim occurrence freq.		Disposition of this Claim	
		<input checked="" type="checkbox"/> Receiving Insp  <input type="checkbox"/> In-Process  <input type="checkbox"/> Customer (.....)	At customer		At PT. KYBI		<input checked="" type="checkbox"/> First time <input type="checkbox"/> Reoccured/routin  Disposition of defect part <input type="checkbox"/> Keep to use <input type="checkbox"/> Return to Supplier  <input checked="" type="checkbox"/> Scrapped at PT.KYBI		<input checked="" type="checkbox"/> Pay compensation \$51515  <input type="checkbox"/> Send the replacement <input type="checkbox"/> Q By Air <input type="checkbox"/> Q By Sea 1970-01-01
			<input checked="" type="checkbox"/> Sorted by Customer (.....)  <input type="checkbox"/> Sorted by Supplier Date:_____		<input type="checkbox"/> Sorted by Supplier Date:_____				
			(please come to PT KYB)		(please come to PT KYB)				
			<input type="checkbox"/> Sorted by PT.KYBI  <input type="checkbox"/> Keep to use				<div>PPC Dept</div>		

INVOICE 3002020008077+3002020009232  
 ORDER :MRB2220707+MRB2230203  
 TOTAL DEL :666 KGS  
 TOTAL CLAIM :11.111.111 KGS

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Fill in by Supplier

PROBLEM IDENTIFICATION			SUPPLIER:	VERIFICATION		
ROOT CASE	TEMPORARY ACTION & PERMANENT ACTION	SCHEDULE	Approved:	M-1	M-2	M-3
Prepared:				REMARK:		
				JUDGE: Q OK Q NG	SIGN	

**Bold Line to be filled by PT.KYBI**

Route: QA Receiving Insp.PTKYBI -> Supplier -> VD PT.KYBI -> QA Receiving PT.KYBI