

QA.DEPT

Reg No : 179/NQR/III/2024

Issued Date : March 04, 2024

Receiv.No :2

Supplier Name MONACO EXPRESS	Part Name RM STEEL TUBE	Part No 24.00 X 20.00	PO No	Rev	Revision Item	Date	Dept.Head	Sect.Head	Foreman	
Search of problem :		<input checked="" type="checkbox"/> Claim: <input type="checkbox"/> Complaint[Information]	Delivery Date Mar 11'2024			01-04-2024 08:19 rw	15-03-2024 09:46	14-03-2024 15:35 Albin Admin		
771 (Detail attached)  INVOICE 3002020008077+3002020009232 ORDER : MRB2220707+MRB2230203 TOTAL DEL : 111.111 KGS TOTAL CLAIM : 8.888 KGS (q2q88)		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 <input checked="" type="checkbox"/> Sorted by Customer (.....)  <input type="checkbox"/> Sorted by Supplier Date:_____ (please come to PT KYB)  <input type="checkbox"/> Sorted by PT.KYBI  <input type="checkbox"/> Keep to use		At PT. KYBI <input type="checkbox"/> Sorted by Supplier Date:_____ (please come to PT KYB)  <input type="checkbox"/> Q Sorted by PT.KYBI  <input type="checkbox"/> Q Keep to use		<input checked="" type="checkbox"/> First time <input type="checkbox"/> Reoccured/routin  Disposition of defect part <input checked="" type="checkbox"/> Keep to use <input type="checkbox"/> Return to Supplier MONACO EXPRESS <input type="checkbox"/> Scrapped at PT.KYBI	<input type="checkbox"/> Pay compensation  <input type="checkbox"/> Send the replacement <input type="checkbox"/> Q By Air <input type="checkbox"/> Q By Sea		
							PPC Dept <div></div>			

Fill in by Supplier

PROBLEM IDENTIFICATION			SUPPLIER:	VERIFICATION		
ROOT CASE	TEMPORARY ACTION & PERMANENT ACTION	SCHEDULE	Approved:	M-1	M-2	M-3
Prepared:			Checked:	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