

QA.DEPT

Reg No : 205/NQR/III/2024
Issued Date : March 04, 2024
Receiv.No :12

Supplier Name	Part Name	Part No	PO No	Rev	Revision Item	Date	Dept.Head	Sect.Head	Foreman
KYB WUXI TOP	RM STEEL TUBE	24.00 X 20.00	661						25-03-2024 11:46 Albin Admin
Search of problem : <div style="text-align: center;"> QAQ (Detail attached) </div> INVOICE WQWQWQ ORDER : QQQQQ TOTAL DEL : 10.000 KGS TOTAL CLAIM : 111.111 KGS <div style="text-align: right;">(AQ)</div>		<input type="checkbox"/> Claim: <input checked="" type="checkbox"/> Complaint[Information]	Delivery Date						
			Mar 03'2024						
		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:_____ <div>(please come to PT KYB)</div> <input type="checkbox"/> Sorted by PT.KYBI <input type="checkbox"/> Keep to use	At PT. KYBI <input type="checkbox"/> Sorted by Supplier Date:_____ <div>(please come to PT KYB)</div> <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 type="checkbox"/> Keep to use <input type="checkbox"/> Return to Supplier KYB WUXI TOP <input checked="" 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			

Fill in by Supplier

PROBLEM IDENTIFICATION			SUPPLIER:		
ROOT CASE	TEMPORARY ACTION & PERMANENT ACTION	SCHEDULE	Approved:		
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