

QA.DEPT

Reg No : 159/NQR/II/2024

Issued Date : January 01, 1970

Receiv.No :12

Supplier Name	Part Name	Part No	PO No	Rev	Revision Item	Date	Dept.Head	Sect.Head	Foreman
			8881				28-02-2024 11:03	26-02-2024 00:00	26-02-2024 00:00
Search of problem :		<input checked="" type="checkbox"/> Claim: <input type="checkbox"/> Complaint[Information]	Delivery Date Feb 04'2024				admin	admin	admin
(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 checked="" type="checkbox"/> Keep to use <input type="checkbox"/> Return to Supplier <input type="checkbox"/> Scrapped at PT.KYBI		<input type="checkbox"/> Pay compensation <input checked="" type="checkbox"/> Send the replacement <input type="checkbox"/> Q By Air <input checked="" type="checkbox"/> Q By Sea 2024-03-01
			<input type="checkbox"/> Sorted by Customer (.....)		<input type="checkbox"/> Sorted by Supplier Date:_____				
			<input type="checkbox"/> Sorted by Supplier Date:_____ (please come to PT KYB)		<input checked="" type="checkbox"/> Q Sorted by PT.KYBI <input type="checkbox"/> Q Keep to use				
			<input type="checkbox"/> Sorted by PT.KYBI <input type="checkbox"/> Keep to use						PPC Dept

INVOICE 3002020008077+3002020009232

ORDER :MRB2220707+MRB2230203

TOTAL DEL :666 KGS

TOTAL CLAIM :11.111.111 KGS

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		

Bold Line to be filled by PT.KYBI

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