

FF 5117 B

EFF: 09/15/18

INCIDENT REPORT FORM								
ID Number: 17-03397	Complete Name Marilag De Cha			Section:		Date of Incident:		Date Issued:
11-0007	marriag De Gria		/To be filed in	PD-PD4 SU		February 16, 2020	×	September 09, 2020
		r art r.	(To be filled-in	ENT REPO		rior)		
				-III KEI O	111	- Andrew		
								•0
aujaomioni ao reporte	On February 16, 2020, it was reported that you allegedly conducted not following SOP, you did not provide changing point for work load adjustment as reported by I-Alert member named M.dorado. In view of the above, please explain in writing within 24 hours why no disciplinary action should be imposed on you for violating the company handbook Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violations and Their Penalties Letter C. Offence Assisted World Specific Violation Specific							
manage on epocine 1101	unong unu mie	an i charics ler	Lei G. Cillerise	MUSIUST MAN	KI KIIEIDOS	snould be imposed on y ss Standard #4 Failure t to damage of company	- E- II	
The allege offense may	be punishable	by Written Wa	rning for 1st of	fense.				
(Please explain in	writing within <u>2</u>	4 hours/days up	on receipt of this	s report. Failu	re to do so	, means you have waived	your ri	ght to be heard.)
	1			CY OF OFF				
1st Offense	2nd Off	ense	314 01	ffense		☐ 4 th Offense		5 th Offense
Issued by: Bebelyn De Casi		Noted by: Kath	erine O. Cabrera	1 16 1707	Received by I	Employeed (C) Mariking De Chavez		Date Received:
Immediate Super Signature over Printed			Manager re over Printed Nan		***************************************	nature over Printed Name		09-16-2020
·		Part 2:	(To be filled-in			9)		nione and a proposition of the p
· · · · · · · · · · · · · · · · · · ·			EXPL	ANATION.				
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Mari Di	deday		Date prepared:		T	NW	[Pate Received:
Employ	De Chavez yee Name er Printed Name		15 11		Ex	Katkerihe O. Cabrera planation received by:		10/16/2070
Signature Divi	. Tungu ranie	THE COL	7/11/1/17	-2020	Sig	nature over Printed Name		
		l jon .	- JULIUI	1				
HR-024-00		fol	4	P			FFF:	09/15/18

RECOMMENDATION / CORRECTIVE ACTION					
Suspension	Workings Da	ys Date fromto	Date Retu	rned to work	
Dismissal	Effective Date:	Offenses Against:			
Remarks:					
	De Castro	Recommended by: K.Cabrera / E.Cailao	Approved by:	Noted By	
Immedia (Signature ov Date:	te Superior Printed Name)	Section/ Department Manager (Signature over Printed Name) ゅ/ 10 / プンカ Date:	Human Resources (Signature over Plinted Name) Date:	President (Signature over Printed Hame) Date:	

SOP is to make 4m daily if the MP is temporary. Support to line.

By signing this notice, I am acknowledging that I have read and understood the information in this IR Form and I have been Informed of the consequences of my action.

Note: For recommendation of the imposition of lesser penalty of verbal / written warning, aside from the signature of the immediate superior & Manager, the

In case/s of SUSPENSION and/or TERMINATION, the President's signature must affix before implementing the Disciplinary Action.

Employee Signature over Printed Name:

Date Received: 11-05-2020

Not aware to make daily 4m

approval of Human Resource is needed before implementing the Disciplinary Action.

Date & Time February 15, 2020/06:00		Illustration	Action Taken
Shift & Group	NS/B		Action taken
Car Maker/ Model	Suzuki YOC		
Line No.	5121		
Name	De Chavez Marilag		
ID No.	17-03397		
Batch No.	76		
Process	Shaige		
FAS or Agency: specify	FAS Jr.Staff		
Person Informed	N.Comia	NO AMERICANI PROPERTY	
Audited by:	M.Dotado	NO AVAILABLE PICTURE	NO AVAILABLE PICTURE
Reason/Risk:			
		•	
Aud	it Details		,
Not following SOP			
Ir.Staff did not provide changing point for workload			
adjustment			Instruct Jr. Staff to always provide changing point
Remarks: Assigned on parts , support to shaige,			if they have workload adjustment.

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FURUKAWA AUTOMOTIVE SYSTEMS LIMA PHILS. INC. Lima Technology Center, Lipa City, Batangas 5117 B

o. Ing.

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		INCIDENT	REPORT	FORM	
ber:	Complete Name:		Section:	Date of Incidents	

ID Number: 17-03397	Complete Name:	Section:	Date of Incident:	Date Issued:	
		PD-PD4 SUZUKI	July 10, 2020	September 09, 2020	
Part 1: (To be filled-in by the Immediate Superior) INCIDENT REPORT					
		INCIDENT REPORT		***************************************	
0 1-1 40 0000 14					
support associate on	s reported that you allegedly con- appearance inspection process as	ducted not following SOP, you a	lid not conduct rechecking on	first five set of	
	(A) 14	hours		* .	
In view of the above, p	lease explain in writing within 5 d	lays why no disciplinary action	hould be imposed on you for	violating the company	
operation procedures	lations and Their Penalties letter C work instructions or work practic	o. Oπense Against Work/ Busine ses which may or may not result	ss Standard #4 Failure to follow	w business standards,	
000 \$ 000000000000000000000000000000000		,,,,	to damage of company prope	ity.	
The allege offense ma	ybe punishable by Suspension fo	rong (1) the	for 2nd offence		
· · · · · · · · · · · · · · · · · · ·	Written Wo	,	TOI E OTTOHISM		
	by As.	<i>y</i>			
(Please explain in	writing within hours/days upon	receipt of this report. Failure to do	so, means you have waived your	right to be heard.)	
	F	REQUENCY OF OFFENSE			
1st Offense	2nd Offense	☐ 3 rd Offense ☐		☐ 5 th Offense	
Issued by: Pala	Noted by:	Pacaitad b	Employee: Oldo	Dela Parairadi	
Bebelyn De Ca	Stro Katherine	O. Cabrera 9 4 1020 Received by	Marilag De Chavez	Date Received:	
Immediate Sup Signature over Print		anager rer Printed Name Si	nature over Printed Name	19-16-2020	
	······································	be filled-in by concerned employe		09-10 2000	
	7 411 2: 170	EXPLANATION	y		
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kahir kahir Marija	po pala Simong Supp Table De Chavez Toyee Name	ate prepared:	Katherine O. Cabrera kplanation received by:	dir p	
kahir kahir Marija	PO pala Simong Supp Adulta De	ate prepared:	Ercchede pa Katherine O. Cabrera	dir p	
kahit kahit Marila Signature	PO pala Thung Supp Advisor De g De Chavez loyee Name The Printed Name	ate prepared:	Katherine O. Cabrera kplanation received by:	dir p	
kahit kahit Marila Signature	PO pala Thung Supp Advisor De g De Chavez loyee Name over Printed Name	ate prepared:	Katherine O. Cabrera kplanation received by:	dir p	
kahit kahit Marila Signature	PO pala Thung Supp Advisor De g De Chavez loyee Name over Printed Name	ate prepared:	Katherine O. Cabrera kplanation received by: ignature over Printed Name	dir p	

Part 3: (To be filled-in Immediate Superior) **EVALUATION / INVESTIGATION** ☐ Verbal Warning ☐ Written Warning **Minor Offense Major Offense** Suspension Dismissal Result of Investigation: Assigned stores did not properly instruct their work load resulting to mis communication & lack of accomplishment on their report. First & 2nd in is the will combine RECOMMENDATION / CORRECTIVE ACTION Suspension Workings Days Date from Date Returned to work Dismissal Effective Date: _ Offenses Against: Remarks: Issued by: Bole actor Recommended by Approved by: Noted By Bebelyn De Castro K.Cabrera / E.Cailao Immediate Superior (Signature over Printed Name) Section/ Department Manager Human Resource President (Signature over Printed Name) Date: 10/10 /2024 Date: Date: Date: Note: For recommendation of the imposition of lesser penalty of verbal / written warning, aside from the signature of the immediate superior & Manager, the approval of Human Resource is needed before implementing the Disciplinary Action. In case/s of SUSPENSION and/or TERMINATION, the President's signature must affix before implementing the Disciplinary Action. By signing this notice, I am acknowledging that I have read and understood the information in this IR Form and I have been Informed of the consequences of my action.

Employee Signature over Printed Name:

Date Received: ___

x 10-31-2010

Date & Time	July 10, 2020/4:25	Illustration	Action Taken
Shift & Group	DS/B		
Car Maker/ Model	Suzuki YD1	Charles Miller	
Lîne No.	5117		The same half to the second of the
Name	Marilag De Chavez		
ID No.	1703397		
Batch No.	76		
Process	Appearance		
FAS or Agency: specify	FAS Jr staff		
Person Informed	C.Ramos		
Audited by:	M.Casama		
Reason/Risk: might produce	defective output.		
Audi	it Details		
Not following SOP			
Ir staff did not conduct rechecking on first five set of			Conduct re-orientation on expert and Jr.Staff
support associate on appear			regarding audit.
	as not certified on appearance		
-	as not certified on appearance	The state of the s	
process			

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