##### INSTRUCTIONS:

##### Supplier is to complete Section 1 and email to their Collins procurement personnel. No sections should be left blank, if they are not applicable, mark as N/A.

##### Collins is to complete Section 2 and return to supplier upon completion.

|  |  |  |  |  |  |  |  |  |  |  |
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| Section 1 – Description of Deviation: To Be Completed by Supplier | | | | | | | | | | |
| 1) Originator’s Name & E-mail | | | 2) Originator’s Phone # | | 3) Date: (DD/MM/YY) | | | 4a) Supplier Name | 4b) Supplier Code | |
|  | | |  | |  | | |  |  | |
| 5) Collins Site Affected (Site Providing the PO) | | | | | | | | | | |
|  | | | | | | | | | | |
| 6) Deviation Request Timing | | | | 7) Supplier Part Number **Ordered** | | | | | | Rev |
| □ Pre-Production  □ Post-Production | | | |  | | | | | |  |
| 8) Purchase Order Affected | | | | 9) Collins Part Number **Ordered** (if different from section 7) | | | | | | Rev |
|  | | | |  | | | | | |  |
| 10) Quantity Affected | | 11) Serial Number for Affected Unit (if applicable) | | | | | 12) Lot ID (if applicable) | | | |
|  | |  | | | | |  | | | |
| ***NOTE: If multiple part numbers or purchase orders are affected by the same issue, state “see table below” in sections 7 - 12 and then proceed to fill in the table in Appendix 1. If more space is required, add additional rows to the table.***  ***This form cannot be submitted covering multiple Collins sites and all parts listed must be affected by the same issue detailed in section 17 Details of Non-Conformance.*** | | | | | | | | | | |
| 13) Collins Buyer Name | | | | | | | | | | |
|  | | | | | | | | | | |
| 14) Liability | | | | | | 15) COL-FRM-0054 Complete and Attached | | | | |
| □ Supplier  □ Collins  **If Supplier is selected, a completed RCCA (Root Cause Corrective Action) COL-FRM-0054 is required.** | | | | | | □ Yes  □ No | | | | |
| 16) If Rejected, Date That Conforming Parts Can Be Delivered | | | | | | | | | | |
|  | | | | | | | | | | |
| 17) Details of Nonconformance (Include detail on specification, drawing or BoM requirement violated) | | | | | | | | | | |
| **Category**  □ Dimensional □ Material Properties □ Material Substitution □ Obsolescence  □ Drawing Error/Change □ Age Control □ Missing Process □ Other | | | | | | | | | | |
| **Condition Should Be (spec, drawing or BoM requirement):** | | | | | | | | | | |
| **Condition Is:** | | | | | | | | | | |
| 17) Root Cause of Deviation | | | | | | | | | | |
|  | | | | | | | | | | |
| 18) Corrective Action | | | | | | | | | | |
|  | | | | | | | | | | |
| 19) List of Attachments | | | | | | | | | | |
| REMINDER – COL-FRM-054 must be completed and attached for Supplier liability as per section 14. | | | | | | | | | | |
| 20) Additional Comments & Justification for Deviation | | | | | | | | | | |
|  | | | | | | | | | | |
| 21) List Any Previous Approved Deviations for This Nonconformance in The Last 12 Months | | | | | | | | | | |
| NOTE: These should be attached to the request. | | | | | | | | | | |
| Section 2 – Authorization to Ship: To Be Completed by Collins | | | | | | | | | | |
| 22) Limitation(s) for Acceptance of Deviation Request (if not applicable, mark N/A) | | | | | | | | | | |
|  | | | | | | | | | | |
|  | Creator | | Design Department | | Quality Department | | | Program | Additional Signatures | |
| Name: |  | |  | |  | | |  |  | |
| Signature |  | |  | |  | | |  |  | |
| Date |  | |  | |  | | |  |  | |

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| 23) Authorization to Ship |
| **You are authorized to ship material as described herein. Final acceptance of the discrepant material is contingent upon approval from Collins Aerospace Material Review Board. Collins Aerospace reserves the right to return the discrepant material. Shipments shall be in accordance with the P.O. (Purchase Order).**  **Collins Aerospace Reference ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Collins Aerospace Buyer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **🞏 Inspection Set**  If this box is checked, supplier must use Appendix 2 for Placards with AR/MA/QN number populated.  Attach placards to exterior packaging in prominent locations. |

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| **Revision / Modification History** | | | |
| Rev. No | Released | Modification Description | Author |
| 00 | 01/8/2024 | New Release | Martin Higgins |
| 01 | 02/27/2025 | Update to all sections | Simon McCartan |

Appendix 1

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Collins Part Number & Rev | Purchase Order | Supplier Part Number & Rev | Quantity | Serial Number | Lot ID |
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Appendix 2

DEFECTIVE

AR/MA/QN #

DO NOT USE

----------------------------------------------------------------------------------------------CUT HERE----------------------------------------------------------------------------------------------

DEFECTIVE

AR/MA/QN #

DO NOT USE

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DEFECTIVE

AR/MA/QN #

DO NOT USE

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