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|  | **REQUEST FOR DEVIATION / WAIVER** |
| 1. COLLINS AEROSPACE SITE AFFECTED:[ ]  Phoenix / Bengaluru Evacuation Systems[ ]  Winslow Liferaft Company (Lake Suzy, FL)  | 2. RDW NUMBER (Supplier ID Code-mmddyy-##):  |
| 3. Deviation (Pre-Production) [ ]  Waiver (Post-Production) [ ]  |
| 4. SUPPLIER NAME AND ADDRESS:        | 5. REQUESTOR NAME:       | 6. REQUESTOR EMAIL:       |
| 7. REQUEST DATE:       | 8. SUPPLIER CAUSED [ ]  CUSTOMER CAUSED [ ]   |
| 9. PURCHASE ORDER #        | 10. PURCHASE ORDER LINE #        |
| 11. SPECIFICATIONS, ENGINEERING DRAWINGS, AND OTHER PARTS AFFECTED: |
| NUMBER | REV | NUMBER | REV |
|        |       |        |       |
|        |       |        |       |
|        |       |        |       |
| 12. COLLINS PART # AND NAME:       |
| 13. PROGRAM(S) AFFECTED:       |
| 14. TITLE OF DEVIATION/WAIVER:       |
| 15. DETAILED DESCRIPTION:DIMENSIONAL[ ]  MATERIAL PROPERTIES[ ]  OBSOLESCENCE[ ]  DWG ERROR/CHANGE[ ]  AGE CONTROL[ ]  OTHER[ ] NONCONFORMANCE:      COLLINS REQUIREMENT:       |
| 16. RATIONALE (Supplier must demonstrate equivalency to the original design and/or provide justification for the proposed change):       |
| 17. SUPPLIER CORRECTIVE ACTION PLAN (OR JUSTIFICATION FOR NO C/A):        |
| 18. COST IMPACT (Supplier cost of replacement or rework if RDW is not approved, if applicable):       |
| 19. IMPACT TO DELIVERY SCHEDULE:       | 20. PRODUCTION EFFECTIVITY (LOT, BATCH, OR S/N #’s):       |
| 21. QUANTITY OF ITEMS INVOLVED:       | 22. RECURRING: YES [ ]  NO [ ]  |
| COLLINS USE ONLY: RECURRING UNTIL      (Maximum 1 year from Request Date) |
| 23. REQUESTOR PROGRAM MANAGER/ENGINEER & DATE:       | 24. REQUESTOR QUALITY ASSURANCE & DATE:        |
| NOTE: The supplier shall reference the RDW Number and Deviation Title on the applicable Certificate of Conformance(s) for each item related to this document. RDW approval shall be effective only for product as specified in Section 20 of this form. | Work instructions to complete this form are available upon request from a Collins representative. Document # PHX-QA-0004-WI |
| ***BELOW SECTIONS TO BE COMPLETED BY COLLINS PERSONNEL ONLY*** |
| 25. COLLINS ENGINEERING DISPOSITION:        |
| 26. IMPACT TO QUALIFICATION TO BASIS:        |
| 27. COLLINS INTERNAL CORRECTIVE ACTION (IF APPLICABLE):       |
| 28. SAP QN #:       |
| 29. COLLINS MRB ENGINEERING APPROVAL & DATE:       \* Refer to MRB list for Authorized MRB Engineer. | 30. COLLINS MRB SQA/QA APPROVAL & DATE:       \* Refer to MRB list for Authorized MRB Quality or SQA personnel. |
| 31. COMPLETED RDW SENT/COPIED TO (LIST NAMES): SUPPLY CHAIN/PROCUREMENT:       MANUFACTURING ENGINEERING:       SITE QUALITY ASSURANCE:       |