



## Supplier Information Request (SIR)

CAPA #: \_\_\_\_\_

<u>Supplier Name and Address:</u>	<u>Purchase Order No(if applicable):</u>	<u>Date:</u>	
	<u>Supplier Representative/Contact Name:</u>	<u>Title:</u>	
<u>Part No (Lot/Batch No as applicable):</u>	<u>Drawing Revision:</u>	<u>Part Description:</u>	<u>Quantity:</u>
<u>Description of Defect/ Variance/Improvement:</u>			
<u>Cause of Defect or Variance/Benefits of Improvement:</u>			
<u>Proposed Corrective Action (C/A)(if applicable):</u>			
<u>Date of Effectivity:</u>			
<u>Schedule Affected?</u>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How?
<b>Below This Line – For EBA&amp;D use only</b>			
<u>EBA&amp;D Project ID:</u>			
<u>Recommendation for Disposition:</u>			
<u>NCR Case Required? (Y/N)</u>		<u>C/A Responsibility – (Supplier or EBA&amp;D) :</u>	
<u>NCR Case ID:</u>		<u>SIR Submitted to address discrepancy or process change :</u>	
<u>Product Engineer:</u>			<u>Date:</u>
<u>Quality Engineer:</u>			<u>Date:</u>
<u>Program Manager:</u>			<u>Date:</u>
<u>Buyer:</u>			<u>Date:</u>
<u>Customer Rep.:</u>			<u>Date:</u>