**Important considerations:**

It’s very important for the Supplier to notify Cubic as soon as possible of a request for deviation. Processing of the Request for Deviation might take 3 to 5 days. Late request for a deviation might impact your on-time delivery.

**Instructions for completing form:**

1. Supplier: Download the Supplier Request for Deviation form (F-018) and enter required information in the following fields of the form (last page of F-018). See Form Fields Table on page 3 for additional guidance.

If initiated by Cubic, download form and complete fields a through n, skip to step 5

1. Supplier: E-mail the completed form to the appropriate Cubic Buyer as identified on the Cubic Purchase Order.

Note: Submit a separate SRD per part number. If submitted for more than one discrepancy, ensure parts are identified.

1. Cubic Buyer: Approve request and forward to Quality Assurance representative from the group with Engineering Design Authority:

Cubic GATR: CMP Quality Engineering

Cubic Global Defense programs: CGD Quality Engineering

Cubic Mission Solutions programs: CGD Quality Engineering

Cubic Transportations Systems: CMP Manufacturing Engineering

1. Quality Assurance: Review request. Complete following fields:
2. If Cubic-responsible non-conformance, state the Root Cause for each nonconformance
3. If Cubic-responsible non-conformance, state action taken/to be taken to contain problem, and to permanently eliminate the root cause(s) for each nonconformance. Include estimated completion dates.
4. Select “Accepted” or “Rejected” box. Complete “Reason” section if rejected. Complete name and signature.
5. Cubic Quality Assurance: If rejected, forward completed rejection to Buyer to forward to Supplier and file in Supplier folder – process complete. If accepted, initiate a Quality Notification (QN) in SAP QM per PF-028.
6. Cubic Quality Assurance: Process QN per PF-028 and S-044. Complete following fields:
7. Cubic’s disposition for each listed nonconformance with appropriate description.
   * + For “Use-As-Is” and “Repair” dispositions, , a justification shall be provided that addresses all requirements for the part/assembly, including possible impact to function, assembly, reliability, maintainability, and testability, as a minimum.
     + For “Repair”, also describe in detail the process to be used.
     + If Cubic-Supplied material is judged “Beyond Economical Repair”, check B.E.R. and Supplier is instructed to return material.
8. The Quality Representative should create and enter the Quality Notification (QN) reference number.
9. Cubic Quality Assurance: If QN is approved, forward copy of completed form to Buyer
10. Buyer: Forward copy of completed form to Supplier
11. Supplier: Upon receipt of a Cubic response to the SRD, supplier must enter the assigned Cubic QN number (section p) as authorization to ship, on their certificate of conformance or pack slip, and include a copy of the approved SRD form with shipment. This must be done on each shipment covered by the SRD. Failure to do so may result in the creation of an additional Nonconformance Tag which will adversely affect your supplier rating.

**Form Fields Table**

|  |  |  |  |
| --- | --- | --- | --- |
| **Section** | **Section Title** | **Information Description** | **Responsible Party** |
| a. | DATE | Date of Request | Supplier |
| b. | PART NAME | Part or Drawing Title | Supplier |
| c. | PART NO | Part Number (Cubic or Manufacturer’s) | Supplier |
| d. | REV | Part or Drawing Revision | Supplier |
| e. | S/N | Serial Number(s), if applicable (may use attachment) | Supplier |
| f. | SUPPLIER NAME, VENDOR ID, ADDRESS, CONTACT | Supplier name, Vendor ID, address, and contact information (email/phone for SRD request) | Supplier |
| g. | PO/LINE ITEM | Cubic Purchase Order number and line item(s) | Supplier |
| h. | BUYER | Cubic Buyer Name | Supplier |
| i. | QUANTITY | Quantity of affected parts (supplier information) | Supplier |
| ORDERED | Enter total number of units ordered |
| INSPECTED | Enter total number of units inspected |
| REJECTED | Enter total number of units rejected |
| j. | SPECIFICATION/REQUIREMENT | State actual non-conformance requirement for which requesting deviation (e.g. dimension, test requirement, etc.) | Supplier |
| k. | ACTUAL OR REQUESTED CONDITION | State actual condition of the product submitted for each nonconformance listed | Supplier |
| l. | ROOT CAUSE OF DISCRAPANCY | State the Root Cause of the deviation to the requirement(s) | Owner of  Root Cause |
| m. | CORRECTIVE ACTION | Action taken / to be taken to eliminate the root cause(s) | Owner of  Root Cause |
| n. | SRD ACCEPTANCE REJECTION | Choose to accept or reject SRD and sign. | Cubic Quality |
| o. | SAP QN | Cubic response and Quality Notification (QN) reference number. | Cubic Quality |
| USE-AS-IS | For "Use-As-Is" dispositions, a justification shall be provided that addresses all requirements for the part / assembly, including possible impact to function, assembly, reliability, maintainability and testability as a minimum. |
| REPAIR | For "Repair" dispositions, these requirements must be addressed as well as providing a detailed description of the repair process. |
| p. | SAP QN | Enter QN number from SAP. | Cubic Quality |
|  | Signature Blocks 5 - 8 | Each signature block must be signed if the part is a GATR part. N/A is acceptable for non GATR parts. | GATR |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. DATE | | b. Part Name | | | c. Part No. | | | d. Rev | | | | e. S/N | | f. Supplier Name, Vendor ID, Address, CONTACT | |
| g. PO/Line Item | | | h. Buyer | | i. Quantity | | | | | | | | |
| Ordered | Inspected | | | | | Rejected | | |
| ITEM | j. SPECIFICATION/REQUIREMENT | | | | | | QTY | | k. ACTUAL OR REQUESTED CONDITION | | | | | | |
| 1. |  | | | | | |  | |  | | | | | | |
| 2. |  | | | | | |  | |  | | | | | | |
| 3. |  | | | | | |  | |  | | | | | | |
| 4. |  | | | | | |  | |  | | | | | | |
| 5. |  | | | | | |  | |  | | | | | | |
| ITEM | l. ROOT CAUSE OF DISCREPANCY | | | | | | ITEM | | m. CORRECTIVE ACTION | | | | | | |
| 1 |  | | | | | |  | |  | | | | | | |
| 2 |  | | | | | |  | |  | | | | | | |
| 3 |  | | | | | |  | |  | | | | | | |
| 4 |  | | | | | |  | |  | | | | | | |
| 5 |  | | | | | |  | |  | | | | | | |
| n. SRD: ACCEPTED REJECTED  REASON: | | | | | | | | | | NAME & SIGNATURE: | | | | | |
| ITEM | o. CUBIC DISPOSITION | | | | | | | | | | | | | | p. SAP QN: |
| 1 |  | | | | | | | | | | | | USE-AS-IS  REPAIR  B.E.R. | | |
| 2 |  | | | | | | | | | | | | USE-AS-IS  REPAIR  B.E.R. | | |
| 3 |  | | | | | | | | | | | | USE-AS-IS  REPAIR  B.E.R. | | |
| 4 |  | | | | | | | | | | | | USE-AS-IS  REPAIR  B.E.R. | | |
| 5 |  | | | | | | | | | | | | USE-AS-IS  REPAIR  B.E.R. | | |
| **1. PURCHASING REP** | | | | **2. QUALITY REPRESENTATIVE** | | | **3. DESIGN/MANUFACTURING ENG** | | | | | | | | **4. MATERIAL CONTROL** |
| **DATE:** | | | | **DATE:** | | | **DATE:** | | | | | | | | **DATE:** |
| **5. SYSTEMS ENGINEERING** | | | | **6. MECHANICAL ENGINEERING** | | | **7. ELECTRICAL ENGINEERING** | | | | | | | | **8. PROGRAM MANAGER** |
| **DATE:** | | | | **DATE:** | | | **DATE:** | | | | | | | | **DATE:** |