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| Abweichungsantrag Nr. Lieferant  *Supplier Deviation No.:* | | | | | | | | | | | ***Deviation Request*** | | | | | | | | | | | | | Ladungsträger und Lieferschein sind auf jeden Fall zu kennzeichnen! *Marking the carrier at delivery and also the delivery note is essential!* | | | | | | | |
| Blatt *Sheet* |  | | | | von *of:* | | |  | | |
| Lieferant: *Supplier:* | |  | | | | | | | | | Benedict Lieferanten Nr.: *Benedict supplier ID.:* | | | | | | | |  | | | | | Benedict Bestellnr.:  *Benedict purchase no.:* | | | | | |  | |
| Verantworlticher: *Manager:* | | |  | | | | | | | | Abteilung: *Department:* | | | | |  | | | | | | | | Tel.: *Tel.:* | |  | | | | Datum: *Date:* |  |
| Benedict Artikelnr.: *Benedict part no.:* | | | |  | | | | | | | Benedict Bezeichnung: *Benedict part description:* | | | | | | | | |  | | | | | | | | | | | |
| Benedict Zeichnungs Nr.: *Benedict drawing No.:* | | | | | |  | | | | | Benedict Änd.-Index: *Benedict revision level:* | | | | | | | | |  | | | | Stückzahl: *number of pieces:* | | | | |  | | |
| Vorgabe, Soll-Zustand:  *Specification:* | | | | | | | | | | | | | | | | | | Beschreibung der Abweichung:  *Description of deviation:* | | | | | | | | | | | | | |
| Abstellmaßnahmen zur Abweichung:  *Corrective and preventive actions:* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name / Abteilung: *Name / Department:* | | | | | | |  | | | | | | Datum: *Date:* | | | |  | | | | | Unterschrift: *Signature:* | | | | |  | | | | |
| **Von Benedict auszufüllen / *To be completed by Benedict:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ergänzungen bzw. Hinweise von Benedict:  *Comments or instruction from Benedict:* | | | | | | | | |  | | | | | | | | | | | | | | **Benedict Abweichungsantrag-Nr.:**  ***Benedict Deviation No.*** | | | | | | | | |
| *N/A* | | Freigegeben durch:  *Approved by:* | | | | | | | |  | | |  |  | | | | | | |  | | | | | | |  | | | |
|  | | Konstruktion: *Design:* | | | | | | | | Ja/*Yes* Nein/*No* | | |  | Datum: *Date:* | | | | | | |  | | | | Unterschrift: *Signature:* | | |  | | | |
|  | | Qualität: Quality: | | | | | | | | Ja/*Yes* Nein/*No* | | |  | Datum: *Date:* | | | | | | |  | | | | Unterschrift: *Signature:* | | |  | | | |
|  | | Verarbeitende Abteilung: affected department: | | | | | | | | Ja/*Yes* Nein/*No* | |  | | | Datum: *Date:* | | | | | |  | | | | Unterschrift: *Signature:* | | |  | | | |
|  | |  | | | | | | | | Ja/*Yes* Nein/*No* | |  | | | Datum: *Date:* | | | | | |  | | | | Unterschrift: *Signature:* | | |  | | | |
|  | | Kennzeichnung der Einzelteile erforderlich  *Marking of every part necessary* | | | | | | | | Ja/*Yes* Nein/*No* | |  | | |  | | | | | | | | | | | | | | | | |
| **Gesamtfreigabe QM**  ***Approval QM:*** | | | | | | | | **Ja/*Yes* Nein/*No*** | |  | | | **Datum: *Date:*** | | | | | |  | | | | **Unterschrift: *Signature:*** | | |  | | | |