|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date: | 04/03/2017 | Number: | NCR- | 33594-0 |  |  | Page: | 1 of 1 |

(Job#-Leg#-xxx, assigned by QA or Mfg Eng Job Lead)

|  |  |  |  |
| --- | --- | --- | --- |
| Originator: | Keith Caban | Company or  SLAC Shop: | Swiss Screw |
| Phone: | X4022 | PO Number | 33594 |
| E-mail: | [kcaban@slac.stanford.edu](mailto:kcaban@slac.stanford.edu) |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Part Name: | Tooling Ball Socket | Quantity Impacted: | 500 | |
| Part Number: | PF-444-316-76 R1 | Serial No. (if applicable): | |  |
| Additional Notes: | Contact : John Amann & Bill Misson | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ITEM NO.** | **NONCONFORMING**  **CHARACTERISTIC** | **DISPOSITION** | **REINSPECTION** | |
| **1** | Magnetic Permeability not to exceed 1.05 @ 200 oersteds  (All 8 AQL sampled all measured between 1.15 - 1.19) | **USE AS-IS**  **REWORK**  **REJECT**  **RETURN TO VENDOR** | **YES**  **NO** |  |
| **2** |  | **USE AS-IS**  **REWORK**  **REJECT**  **RETURN TO VENDOR** | **YES**  **NO** |  |
| **3** |  | **USE AS-IS**  **REWORK**  **REJECT**  **RETURN TO VENDOR** | **YES**  **NO** |  |

Use continuation sheet if necessary. Attach red-lines, photos as necessary

|  |  |  |  |
| --- | --- | --- | --- |
| AGREEMENT: | CONCURRENCE: |  |  |
| **Technical Lead Date** | **Quality Assurance Rep. Date** | **CAM or Project Manager** | **Director (High Risk NCRs Only)\*** |

\* **Risk based definition as set forth by Project’s Quality Assurance Plan; see SLAC-I-020-701-001, NCR procedure.**

Indicate all follow-on or related processes: NONE CAR ECR HOLD