

PRODUCT & PROCESS CHANGE NOTIFICATION

PCN/SREA #:

PCN-23-028

PCN – Customer notification required

SUPPLIER REQUEST for ENGINEERING APPROVAL

PCN/SREA DATE:

07/17/2023

SREA – Customer approval required

Amphenol Fremont:			
Initiator name:	Yessica Martinez	Date:	7/19/2023
Part(S)/Process Name:	All NOVA NPC-1220 Sensors Series		

Customer Information:			
Customer:	NOVA NPC-1220 sensors series Customers	Address: N/A	
Customer contact name:	N/A	e-mail	N/A
		Phone# :	N/A

Information:							
Type of change:	<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor					
Effect of change:	<input type="checkbox"/> Form	<input type="checkbox"/> Fit	<input type="checkbox"/> Function	<input type="checkbox"/> Reliability	<input checked="" type="checkbox"/> Other		
Explain if 'Other': Internal component die change							

Process/Product Information:							
Reason for change:	<input type="checkbox"/> Design	<input type="checkbox"/> Processing	<input type="checkbox"/> Machine/Tooling	<input type="checkbox"/> Cost Reduction			
	<input checked="" type="checkbox"/> Part/Material	<input type="checkbox"/> Location	<input type="checkbox"/> Supplier Change	<input type="checkbox"/> Other			
Explain if 'Other':							
Description of change:	PT3511 pcell die will replace the current P111 Die						
Current Format:	N/A		Proposed Format:	N/A			
List of attached Document:	N/A						
Proposed method to identify changed product: (Lot#, Effective Date, Shipment date, Part number via e-mail)	N/A						
Is piece cost affected? If yes, What is the cost effect:	\$: N/A						
Will incorporation of change affect shipping schedule? If yes, please provide details:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Details:				
Fremont Quality engineer name:	E.G.						
Fremont Quality engineer signature:	Eduardo Gallaga						
Additional comments:							
Approval to this document is required by: (Due date for a response from Customer)	N/A						
<u>Please check the scenario applicable to this form:</u>							
<input type="checkbox"/> This is a request for the proposed plan approval. Once approved by customer, tests will be conducted per the attached test plan and results will be presented to the customer for final approval							
<input type="checkbox"/> This is a request for approval of the change per the attached test results. If we do not hear back from customer before the due date given above, it is assumed that customer has approved the change							
<input checked="" type="checkbox"/> This is a notification of the change.							

Below Information to be completed by customer.			
Approval or rejection	Approved <input type="checkbox"/>	Rejected <input type="checkbox"/>	Approval/Rejection date:
Customer representative name:	Customer representative signature:		
Additional comments:			

Signature Certificate

Reference number: RJS2O-JVHKH-DWRDM-A9PN9

Signer

Timestamp

Signature

Eduardo Gallego

Email: eduardo.gallego@amphenol-sensors.com

Sent: 19 Jul 2023 16:51:01 UTC
Viewed: 19 Jul 2023 16:53:18 UTC
Signed: 19 Jul 2023 16:54:30 UTC



Recipient Verification:

✓ Email verified 19 Jul 2023 16:53:18 UTC

IP address: 201.163.101.214
Location: Tijuana, Mexico

Document completed by all parties on:

19 Jul 2023 16:54:30 UTC

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