

Submit Only to SupplierManagement@insitu.com			
Supplier Request for Engineering Assistance (SREA)			Insitu Supplier Quality
Part/ Document Number (Including Revision Level) <small>XXX-XXXXXX Rev XX</small>	Part Name		PR #
Supplier	Supplier Contact	Phone #	Date Rcv'd
			Date Closed
Supplier Address, City, State, Zip		Email Address	
Insitu POC	Insitu Purchase Order #	Applicable NCMR #	
Severity (always select the highest applicable) <input type="checkbox"/> S0 – Personnel Risk/ Critical Safety Item <input type="checkbox"/> S3 – Usage Risk / Reliability Issues <input type="checkbox"/> S1 – Flight or Production Risk / Unable to Produce <input type="checkbox"/> S4 – Non-Critical <input type="checkbox"/> S2 – Mission or Configuration Risk / Reliability Issues			
Reason for Request (select all that apply) <input type="checkbox"/> End of Life <input type="checkbox"/> Manufacturability <input type="checkbox"/> Design/Specification Correction <input type="checkbox"/> Quality Improvement <input type="checkbox"/> Finish <input type="checkbox"/> Finish <input type="checkbox"/> Reporting a Problem <input type="checkbox"/> Weight <input type="checkbox"/> Weight <input type="checkbox"/> Cost Savings/Affordability <input type="checkbox"/> Material <input type="checkbox"/> Material <input type="checkbox"/> Other, _____ <input type="checkbox"/> Tolerance <input type="checkbox"/> Tolerance <input type="checkbox"/> Dimension <input type="checkbox"/> Dimension <input type="checkbox"/> Admin. Error			
<input type="checkbox"/> By checking this box, Supplier grants to Insitu a non-exclusive, royalty free license for the right to make, have made, reproduce and sell any supplier Intellectual Property (IP) contained in suppliers Request for Engineering Assistance and any attached documents. Specific IP must be identified in the Proposed Solution section of this form.			
Attachments <input type="checkbox"/> FORM-01518, Supplier Weight Tracking Form <input type="checkbox"/> Marked up Drawing/Document <input type="checkbox"/> Cost Benefit Analysis <input type="checkbox"/> Test Results/Historical Data <input type="checkbox"/> Other, _____		Requested Date (Preferred date change is incorporated)	
Description of the Problem			

This approval is granted upon the understanding that it is advisory in nature and in no manner changes the sellers original responsibility for ensuring that all characteristics designated in the applicable engineering specifications and/or inherent in the samples as originally tested and approved, are maintained. The seller accepts full responsibility for the changes or types of changes listed above; and should such changes result in less satisfactory performance than experienced with the originally approved item, Seller will fully reimburse the Buyer for all expenses incurred to correct the deficiency page.

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<p>Proposed Solution/Change</p> <p>Clearly address the following (if applicable):</p> <ul style="list-style-type: none"> Modification Details - What is the modification to the product definition (form/fit/function, weight), source, process, location, or other supply consideration being proposed? Supplier Implementation Timing - How much time would be required to implement the change? <p>Effect of Change</p> <p>Clearly address the effect of the change:</p> <ul style="list-style-type: none"> Interchangeability - How would the change affect form/fit/function and related assemblies? Production - How would the change affect production tooling, processes, capability, or location? Cost - How will the change affect cost, including tooling, part cost, and value? Priority - Support the determination if 1-3 were selected. 			
Insitu Review of SREA Proposal (to be completed by Insitu)			
EOL #	ECR #	ECN #	
<input type="checkbox"/> Approved, updated documentation will be provided Supplier shall not implement any design changes until revised documents have been communicated or a Supplier Request for NCM has been submitted and approved (FORM-01537, Supplier Nonconforming Material Request Form).			
<input type="checkbox"/> Pending, see additional comments			
<input type="checkbox"/> Rejection, rationale below Re-submit SREA with the following information:			

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