maxon

ID (maxon):

Supplier Request Form
Change Request or Special Release for Deviation

First page to be filled out by Supplier

Company   Contact Person   Date

Select maxon site

maxon Part no.   Part Rev.   Description

Drawing no.   Drawing Rev.

Please choose an option:

*Please use following **subject** on your e-mail: Abbreviation of maxon location / Part no / Order no / Request type*
Example 1: mmag / Part 123456 / Order 1234567 / Special Release
Example 2: mms / Part 123456 / Order 1234567 / Change Request

Click on "Send" to create an email to SupplierRequests@maxongroup.com.

maxon

Supplier Request Form
Change Request or Special Release for Deviation

For maxon use only

SharePoint ID:

Approval required from customer?   Change Management Agreement
yes   no   None   Design   Design and Process   Fit and Specified Function

If "Design" / "Design and Process", approved?   Date of approval
yes   no   n/a

Approved?
yes   yes, with conditions   no, reason

Conditions and reasons

Drawing change necessary?   IFS Case no.
yes   no   n/a

Are actions required on the part of maxon, e.g. in the incoming goods-, assembly- or final inspection?   yes   no
If yes, which ones?

Who is responsible?

Role		n/a	Name	E-mail	Signature	Date
If applicable	Engineering					
	Production					
	Sales					
	QE					
SQE						