Number: 602484900
Revision: 0.0
Approved: Stefan Ehret

## Form **GP Supplier request for change \_WG** [EN]



## Request for change (Please select/fill in as appropriate)

Supplier	Date					
Production site	Name of the applicant					
Product/ Material Drawing number with index: Material number [Wieland]:	Product designati Material:	on:				
Reason for the enquiry  Process change Product change Change of supplier	☐ Other:					
Product category  Construction Tooling Execution	☐ Manufacturing ☐ Other:	process				
Cost impact Cost reduction Cost neutral	<b>No risk for</b> ☐ Capacity ☐ Supply	☐ Dimensions, ☐ Special featu	form, function ires			
Attachment/s:  Samples Test certificate	☐ Drawing/ Sketo ☐ Other:	ch				
Description of the change						
Justification of the change and effect if the application is rejected						
Planned corrective actions of the supplier		Responsible	Date			
Note:  This change request in no way releases the supplier from its obligation to deliver the products / materials in accordance with the contract, in particular to comply with all features or product properties not affected by this change request, which are defined in the specifications / specifications and / or on the basis of previously tested and approved samples. The Supplier warrants that the originally agreed functions and properties as well as the suitability of the products / materials for a specific purpose or use are not negatively affected by the deviation. Furthermore, the supplier is obliged to carry out a new sampling of the affected product / material. The costs and expenses arising from or in connection with the change and/or the resampling shall be borne by the supplier.						
Signature of the supplier's authorised representative						
Date Nam	ne Sign	nature	E-mail address			

Number: 602484900 Revision: 0.0 Approved: Stefan Ehret

Form **GP Supplier request for change \_WG** [EN]



Approval procedure						
(to be completed by Wieland)						
Supplier's application corre	ectly completed and	∐ Yes ∐ No (se	☐ Yes ☐ No (see reason)			
checked?	l	DV DN-	0t	.1.		
Wieland customer approva	ı requirea?	☐ Yes ☐ No	Customer approved?   Yes   N	ИО		
Internal quality info record	[Wieland]:					
Risk assessment						
Decision						
☐ Approved						
Approved with conditions (see justification)						
Rejected (see justificati	on)					
Conditions or reasons for rejection						
			T			
Wieland quality	Date	Department/ Name	Signature			
assurance	Bate	Dopartment Name	Signature			
4004141100						
	Date	Department/ Name	Signature			

GP Supplier request for change \_WG [EN] No.: 602484900 Status: 9/4/2025 1:43 PM Page 2 from 2 Internal