

(Please select/fill in as appropriate)

Supplier		Date	
Production site		Name of the applicant	
Product/ Material Drawing number with index: _____ Product designation: _____ Material number [Wieland]: _____ Material: _____			
Category <input type="checkbox"/> Construction <input type="checkbox"/> Manufacturing process <input type="checkbox"/> Mould <input type="checkbox"/> Other: <input type="checkbox"/> Execution			
Deviation on the above mentioned product/ material Order quantity: _____ Batch [supplier]: _____ Quantity affected: _____ Other: _____ Order number [Wieland]: _____			
Enclosure: <input type="checkbox"/> Samples <input type="checkbox"/> Drawing/ Sketch <input type="checkbox"/> 8D-Report <input type="checkbox"/> Other: <input type="checkbox"/> Test certificate			
Description of the deviation			
Justification of the deviation and impact if the application is rejected			
Planned corrective actions of the supplier		Responsible	Date
Note: This special release does not in any way release 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 special release, 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. Upon request by Wieland, the supplier shall submit an 8D report with the application. Furthermore, the supplier is obliged to carry out a new sampling of the affected product / material at the request of Wieland. The supplier shall bear the costs and expenses arising from or in connection with the special release and/or the re-sampling.			
Signature of the supplier's authorised representative			
_____	_____	_____	_____
Date	Name	Signature	E-mail address

Approval procedure			
(to be completed by Wieland)			
Supplier application complete and checked?		<input type="checkbox"/> Yes	<input type="checkbox"/> No (see reason)
Wieland customer approval required?		<input type="checkbox"/> Yes	<input type="checkbox"/> No Customer approved? <input type="checkbox"/> Yes <input type="checkbox"/> No
Internal quality info record [Wieland]:			
Risk assessment			
Decision			
<input type="checkbox"/> Approved			
<input type="checkbox"/> Approved, with conditions			
<input type="checkbox"/> Until (period)			
<input type="checkbox"/> Quantity			
<input type="checkbox"/> Batch			
<input type="checkbox"/> Rejected (see reason)			
Further conditions or reasons for rejection			
Wieland quality assurance			
	Date	Department/ Name	Signature
Wieland quality assurance			
	Date	Department/ Name	Signature