



DENSO SUPPLIER PROCURED CHECK FIXTURE, GAGE, AND TEST EQUIPMENT

Forward To: **REQUEST/ APPROVAL**

Parts Supplied to DENSO:

Department:	
Name:	
Telephone:	
FAX:	

- Ceramic Products
- Electronic Products
- Instrument Cluster
- Fuel Injection
- Starter/ Alternator

DENSO Part No:		Part/ Material:	
Supplier Name:		Sup. Contact:	
Telephone:		FAX:	
		Email:	

DEVICE REQUEST/ REQUISITION APPROVAL

This request is for the following type of device: Check Fixture Gage Test Equipment

Supplier Request for device manufacture/purchase (attach a drawing of this device to this form):

Please describe why device is needed and how it would be used for the DENSO Part/ Raw Material produced:

Device Manuf:		Est. Cost:		Est. Build Date:	
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DENSO Approval/ Denial for Device Procurement:

Device is approved for procurement/ manufacture.
Supplier can proceed with securing device. When device is procured, submit the Supporting Documents listed in below in Device Approval for Use for authorization to use.

Device is not approved due to the following reasons: _____

Approval by DENSO does not constitute DENSO's acceptance of financial responsibility, this is approval for use only.

DEVICE APPROVAL FOR USE

Supplier Request for device approval for use:

Please confirm the following supporting documents/ information have been attached to this request:

- Calibration Certification Data Maint./ Recertification Schedule
- Device Use Instructions Photo of device.
- Gage R & R Study of (Pc) Characteristics

Name of Calibration Company: _____

Supplier

Approved	App. Date	Checked	Written

DENSO Approval/ Denial for Device Use:

Device is approved for use.

Device is not approved for use for the following reasons:

DENSO

Approved	App. Date	Checked	Written