

MBUSI Service Parts

Supplier Guide

Quality of Parts / PPAP Requirements



Document History

| Version Number | Author | Location of Change(s) | Summary of Changes | Date |
|-----------------------|---------------|------------------------------|---------------------------|-------------|
| Version 1 | FATORRE | | Final Draft Version | 5/1/2022 |



PPAP Requirements

Introduction:

This document will give suppliers an understanding of the Global Service Parts, (MBUSI GSP) PPAP Submission process, in order to successfully meet initial part approval. Service Parts SQE adhere to the requirements of the VDA 2 QUALITY ASSURANCE FOR SUPPLIERS – Production Process and Product Approval Standard. Because this VDA Standard is an automotive industry standard practice, it is mandatory that all Service Parts Suppliers adhere to this standard also.

Contact Information:

For any quality-related questions, please refer to the Quality Manager in the MBUSI Contacts tab within the Service Parts Supplier Portal.

Content:

Suppliers are required to follow the PPAP requirements listed in the VDA 2 – Quality Assurance for Supplies – PPA (it is the suppliers responsibility to have the necessary VDA documents available).

1. All service parts that are current series parts can default to PPAP submissions to the PIA. Please reference the applicable PIA Information/PE # when required.
2. All service parts that are service unique can be of the PIA submission **UNTIL** a change (i.e. location change, process change, etc.) occurs.
3. When a change (any event which requires a new PPAP) occurs the supplier and the Service Part SQE will agree upon the level of PPAP submission required (refer to step 3 in the VDA PPAP Cover Sheet Instructions link).
4. Reference the below attachment for details regarding the proper method for filling out the VDA Cover Sheet.

NOTE: This document is a requirement for ALL submission regardless of the agreed upon Level as mentioned in step 3. This document is reference, if the supplier has other preferences for a compatible form, the Service Parts SQE must agree with the proposed form.

5. The VDA 2 Standard is the default reference document for all questions related to Service Part PPAP processes.

Service Parts QC follows the requirements and recommendations of VDA 2 for the PPAP submission and part approval process. Below our instructions for the submission of the cover sheet and a link to download it can be found.



VDA2 PPAP Submission Requirements

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| ATTN SQE: | Supplier Name: | SUBMISSION TYPE: | SUBMISSION LEVEL: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Customer Information: | Supplier Code: | <input type="checkbox"/> Production process and product approval report | <input type="checkbox"/> Re-approval of PPA Process | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MBUSI SERVICE PARTS NACW 3588 Bibbville Rd. Woodstock, AL 35188 | Supplier Contact Info: | <input type="checkbox"/> Report covering other samples | <input type="checkbox"/> Long-term production stop (more than 12 months) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | | <input type="checkbox"/> Sample submission | <input type="checkbox"/> Modification in the supply chain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone: | | <input type="checkbox"/> New parts | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email: | | <input type="checkbox"/> Product Modification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> Production process modification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Attachments / Items For Inspection | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Product / Process | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.1 Geometry, dimension check | <input type="checkbox"/> 1.9 ESD test | <input type="checkbox"/> 8 Software test report | <input type="checkbox"/> 16 Tooling list | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.2 Function check | <input type="checkbox"/> 1.10 Reliability tests | <input type="checkbox"/> 9 Process FMEA | <input type="checkbox"/> 17 Confirmation of agreed capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.3 Material check | <input type="checkbox"/> 2 Samples | <input type="checkbox"/> 10 Process flow chart | <input type="checkbox"/> 18 Written self-assessment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.4 Haptic check | <input type="checkbox"/> 3 Technical specifications | <input type="checkbox"/> 11 Control plan | <input type="checkbox"/> 19 Part history | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.5 Acoustics check | <input type="checkbox"/> 4 Product FMEA | <input type="checkbox"/> 12 Confirmation of process capability | <input type="checkbox"/> 20 Confirmation of suitability of transport equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.6 Odour check | <input type="checkbox"/> 5 Design release | <input type="checkbox"/> 13 Achievement of special characteristics | <input type="checkbox"/> 21 PPA status of the supply chain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.7 Appearance check | <input type="checkbox"/> 6 Compliance with legal requirements | <input type="checkbox"/> 14 Test/inspection equipment list | <input type="checkbox"/> 22 Approval of coating systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> 1.8 Surface check | <input type="checkbox"/> 7 Material data sheet / IMDS | <input type="checkbox"/> 15 Capability study testing equipment | <input type="checkbox"/> 23 Others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Part Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Part Description: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Drawing Number: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issue / Date: | Part Numbers: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SOMS / PE: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUPPLIER CONFIRMATION: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CONFIRMATION BY SUPPLIER - It is hereby confirmed that the sample submission has been carried out in accordance with the agreed submission level to VDA volume 2. | Signee Information: | Comments: | Signature: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Phone: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Email: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Department: | The IMDS data set has been drawn up under IMDS ID-No.: | Date: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Customer's Decision (To Be Filled Out By MBUSI SQE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Approval | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Product / Process | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | OVERALL | Overall Process | Overall Product | 1.1 | 1.2 | 1.3 | 1.4 | 1.5 | 1.6 | 1.7 | 1.8 | 1.9 | 1.10 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| OK | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Conditionally OK: Follow-Up Submission Required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| NOK: Re-approval of PPA Process is Required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Deviation Approval Number: | Valid Until: | Quantity: | Date Of Re-Approval PPA Process: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Department: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TO BE FILLED OUT BY MBUSI SQE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SQE SIGNATURE: | | | | | | | | | | | | | | | | | | | | | | | | | | Date: | | | | | | | | | |

- 1) **Sender:**
Enter Company Name and Address of supplier submitting this PPAP.
- 2) **Identify the reason for the PPAP submission:**
Use the first option First Sample Test Report VDA for all first time submissions, otherwise, use the applicable agreed upon selection.
- 3)
- 4) **Highlight the applicable fields when any additional information is required for the PPAP submission.**
Examples:
 - a. Highlight *1.1 Geometry Dimensional Check* for any dimensional data required and being submitted with this submission.
 - b. Highlight *1.7 Appearances* for any visual requirements required and being submitted with this submission.



5) **Supplier Details:**

A signature from the responsible mgmt. representative of the supplier is required.

Step 4 is very important step and must be filled in accurately and as complete as possible – any questions should be directed to your MBUSI Service Part SQE ASAP.

6) **Customer Decision:**

This will be filled out by the MBUSI Service Part SQE.

Please find the link to the VDA PPAP Cover Sheet in the Supplier Guide Quality folder, titled SG 4.1

