Corrective Action Request

Ship a copy of this form (inside the box) along with the defective samples to the address below.

Attn: Phil Whitmire
Cornell Dubilier
140 Technology Place
Liberty, SC 29657
USA

Note- An RMA (Return Material Authorization) number is not necessary for a CA request unless credit is to be issued for the returned samples verifying the nonconforming condition.

Please fill in all of the information requested below:

Primary Company Name: _____ Secondary Company Name: _____

Primary Contact Name: _____ Secondary Contact Name: _____

Primary Contact Email: _____ Secondary Contact Email: _____

Primary Contact Phone #: _____ Secondary Contact Phone: _____

Primary Contact Fax #: _____ Secondary Contact Fax#: _____

Details regarding nonconformity

Part number as marked on the capacitor: _____

Number of know nonconforming capacitors. _____

Explanation of nonconforming condition _____

_____

_____

_____

Capacitor samples included: Yes [ ] No [ ] if Yes how many are included? _____

Has your company experienced this nonconformity in the past? Yes [ ] No [ ]

If yes, please provide a few details:

If the CA response is to be sent directly to the REP agency, please include this information in writing with the CA request paperwork and samples.

Within 24 hours from the time the request is received and validated, a CA request receipt will be faxed or emailed to the individual requesting the CA. The CA receipt provides confirmation of receipt, Cornell's CA# assigned, and provides information about our need for additional samples.