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Apéndice A – Terminación de un Certificado de Emisión de una Parte (PSW)

INFORMACIÓN DE LA PARTE

1. **Nombre de la Parte y 2a. Número de la Parte del Cliente:** Nombre y número de la parte ó ítem final y terminado, liberado por Ingeniería.
- 2b. **Número de Parte de la Org.:** Número de la parte definida por la organización, si existe alguno.
3. **Mostrado en el Número de Dibujo:** Registros de diseño que especifiquen el número de parte del cliente siendo emitida.
4. **Nivel de Cambio de Ingeniería & Fecha:** Muestre el nivel de cambio y la fecha de los registros de diseño.
5. **Cambios de Ingeniería Adicionales & Fechas:** Listar todos los cambios de ingeniería autorizados todavía no incorporados en los registros de diseño pero ya incorporados en la parte.
6. **Regulación de Seguridad y/o Gubernamental:** "SI" si así se indica en los registros de diseño, de lo contrario sería "No."
7. **Número de Orden de Compra:** registrar este número como se encuentre en la orden de compra/contrato.
8. **Peso:** Registrar el peso actual en Kilogramos con cuatro decimales, a menos que se especifique otra cosa por el cliente.
- 9/10. **Número de ayuda para Chequeo, Nivel de Cambio y Fecha:** Si se solicita por el cliente, registrar el número de ayuda para chequeo, su nivel de cambio y la fecha.

INFORMACIÓN DE LA ORGANIZACIÓN DE MANUFACTURA

11. **Nombre de la Organización & Código del Vendedor/Proveedor:** Mostrar el nombre y código asignado a la planta de manufactura en la orden de compra/contrato.
12. **Dirección, Región, Código Postal, País:** Mostrar la dirección completa de la localización donde el producto se manufacturó. Para "Región," registrar estado, país, provincia, etc.

INFORMACIÓN DE LA EMISIÓN A LOS CLIENTES

13. **Nombre/División del Cliente:** Mostrar el nombre y división del corporativo ó grupo de operaciones.
14. **Comprador/Código del Comprador:** Registrar el nombre y código del comprador.
15. **Aplicación:** Registrar el año modelo, el nombre del vehículo, motor, transmisión, etc.

REPORTES DE MATERIALES

16. **Substancias de Preocupación:** Registrar "SI," "No," ó "n/a".
- IMDS/Otro Formato del Cliente:** Circular "IMDS" u "Otro Formato del Cliente" conforme sea apropiado. Si se emite vía IMDS incluir: # de ID del Módulo, # de Versión, y Fecha de Creación. Si se emite vía otro formato del cliente, registrar la fecha de confirmación del cliente en que se recibió.
17. **Identificación de Partes con Polímeros:** Registrar "SI," "No," ó "n/a".

RAZÓN PARA LA EMISIÓN

18. **Checkar el/los cuadro(s) apropiados.** Para materiales a granel, además de checkar el cuadro apropiado, checkar "Otros" y escribir "Materiales a Granel" en el espacio provisto.

NIVEL DE EMISIÓN

19. **NIVEL DE EMISIÓN:** Identificar el nivel de emisión solicitada por el cliente.

RESULTADOS DE LA EMISIÓN

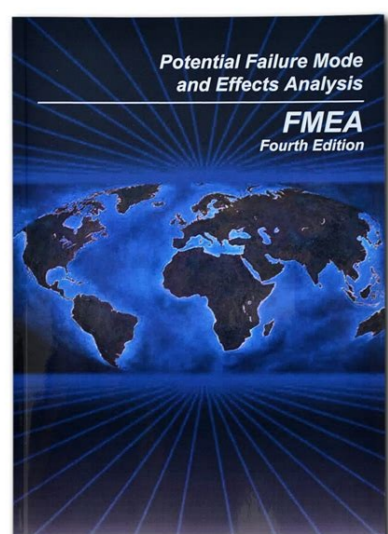
20. **Checkar los cuadros apropiados para dimensionales, pruebas de materiales, pruebas de desempeño, evaluaciones de apariencia, y datos estadísticos.**
21. **Checkar el cuadro apropiado.** Si "no," registrar la explicación en "comentarios" abajo.
22. **Moldes/Cavidades/Procesos de Producción:** Para instrucciones, ver 2.2.18.

DECLARACIÓN

23. **Registrar el número de piezas manufacturadas durante la corrida de producción significativa.**
24. **Registrar el tiempo (en horas) tomados para la corrida de producción significativa.**
25. **EXPLICACIÓN/COMENTARIOS:** Ofrecer comentarios explicativos de los Resultados de la Emisión ó cualquier desviación de la Declaración. Anexar información adicional conforme sea apropiado.
26. **ETIQUETADO NUMERADO DEL HERRAMENTAL DEL CLIENTE:** Existen herramientas propiedad del cliente y en acuerdo con ISO-TS 16949 y requerimientos específicos del cliente, responder "SI" ó "No." Puede no aplicar para proveedores internos de FEON.
27. **FIRMA AUTORIZADA DE LA ORGANIZACIÓN:** Un oficial responsable de la organización, después de verificar que los resultados muestren cumplimiento con todos los requerimientos del cliente y que toda la documentación requerida esté disponible, debe aprobar la declaración y ofrecer el **Puesto, Teléfono, Número de Fax, y Dirección de E-mail**.

SÓLO PARA USO POR EL CLIENTE

Dejar en blanco.



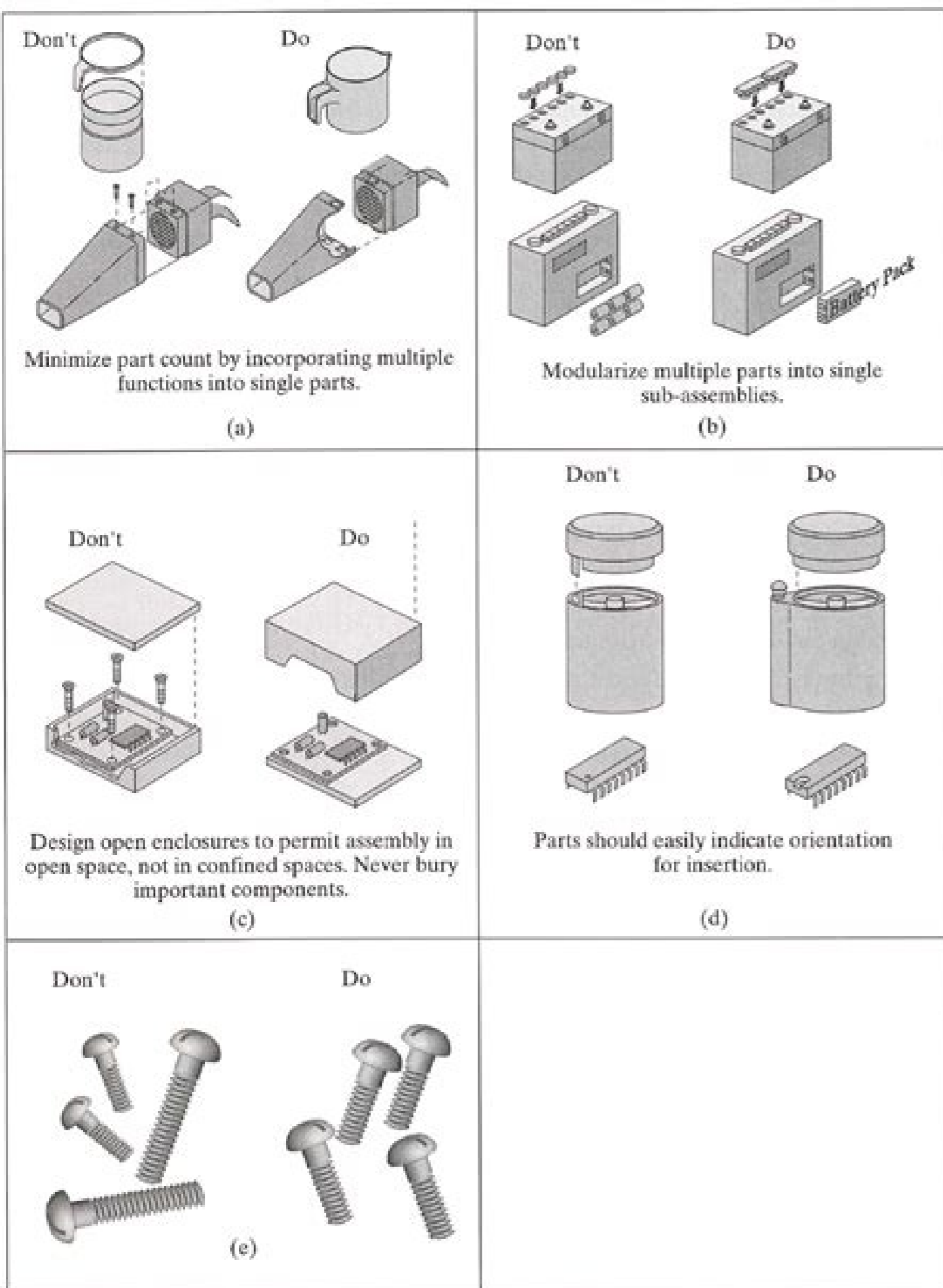
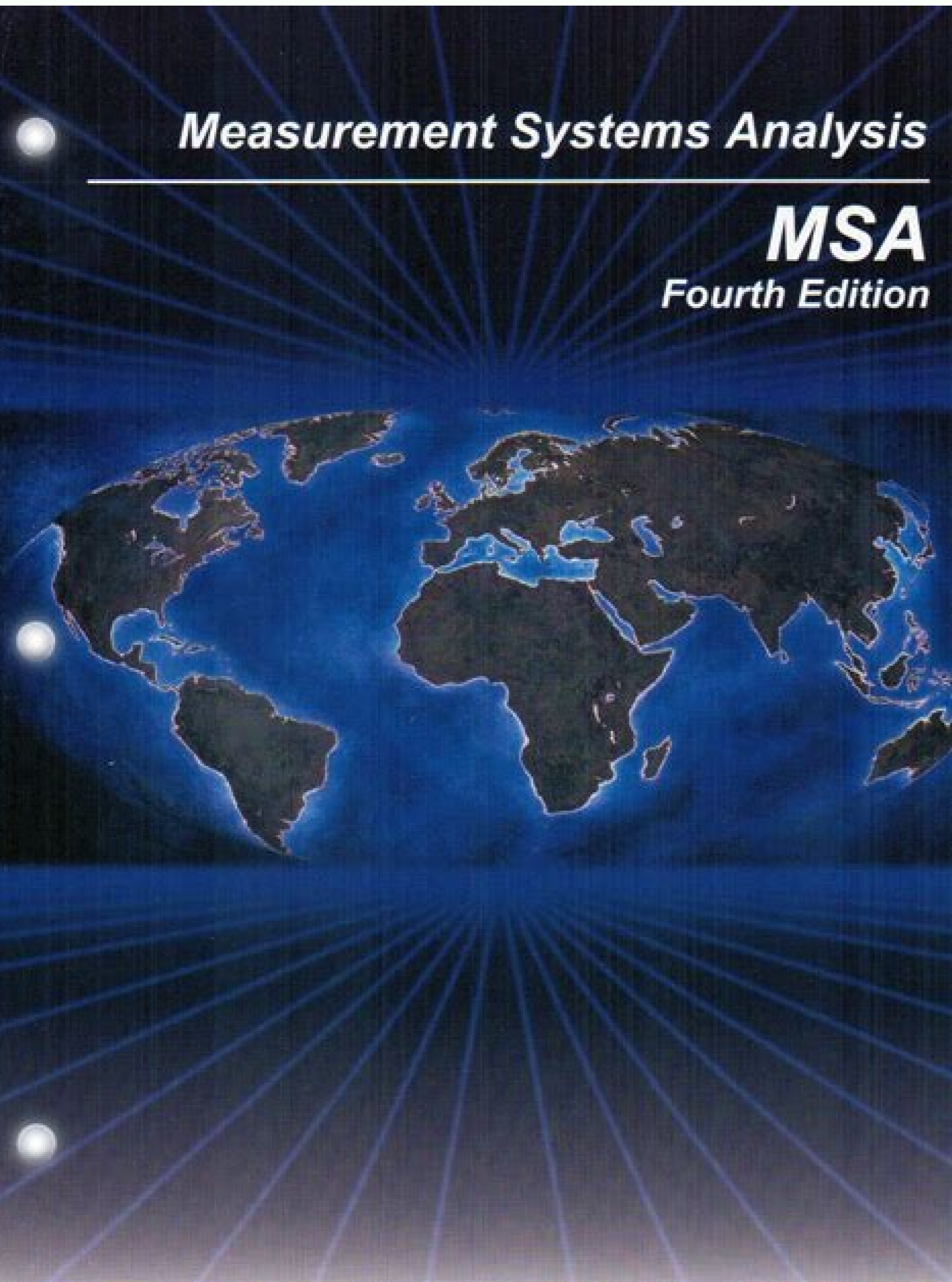


FIGURE 7.7a
 Design for assembly examples. (*Product Design: Techniques in Reverse Engineering and New Product Development*, by Otto/Wood, © 2001, Prentice-Hall. Reprinted by permission of Pearson Education, Inc., Upper Saddle River, NJ.)



Msa best units. Msa pay scale. Msa serial number. Aiag msa reference manual pdf. Aiag msa guidelines.

This is an acceptable and appropriate means to achieve traceability to the NIST, provided that the capacity of the commercial/independent laboratory can ensure through processes such as laboratory accreditation. The client and suppliers must thoroughly understand the requirements of the project, how will the deliverables and all those for which both must be achieved. An ideal medicine system would only produce "correct" measurements every time it is used. Develop a flow diagram that shows chronic process steps in the manufacture or assembly of the piece or subsystem. (Rule 3) The operating instructions require the operator to verify the weight in the configuration and every hour according to a sample. The 3 portions of this chapter adapted with the permission of the analysis of medicine systems: a tutorial of G. IV MSA 4th Edition guide rose - average and range, anava, bias, linearity, control III Basic detection of attribute, hypothesis testing types III non -replicable (for example, destructive tests) alternative approaches complex variable rank IV, average average and rank, anova, bias linearity control cuadros, IV multiple systems, graphs or graphical tests of annihily of Anova III III III, IV Miscellane Alternative Approaches IV OTHER WHITE DOCUMENTS: Available in The AIAG website (www.aiag.org) Note: Regarding the use of the Estandar Deviation Historically, by Convention, an 99% Spread has been used to represent the $\hat{\sigma}_a \sim \hat{\sigma} \cdot \sqrt{1.5}$ - Full - $\hat{\sigma}_a \sim \hat{\sigma} \cdot \sqrt{1.5}$ - distressing medical error, represented by a 5.15 multiplier factor (where grater is multiplied by 5.15 for a total propagation of 99%). But, with a process control philosophy, the interwards focuses on the variation of the piece is due to common causes or special causes the process. In that case, the variation in the data may be due to changes in volume or changes in ambient temperature. The team can investigate several issues to help decide what direction or route will be followed to design the medicine process. The medicine system is the compilation of instruments or qualifications, these, operations, all, accessories, software, personnel, environment and assumptions used to quantify a unit of measurement or evaluation of fixation to the characteristic of the characteristic that is measure; The complete process used to obtain measurements. This can lead to an understanding of the characteristics of process control that directly affect the characteristics of the piece. This is achieved through the mutual recognition arrangements (MRA) and making interlaboratory comparisons between the NMIS. One thing to keep in mind is that the capabilities of these NMI will vary from one country to another and not all types of measurements are compared regularly, so there may be differences. To obtain the greatest benefit of the medicine process, study it and address it as a process with inputs and outputs. P 15 This chapter was written with the philosophy of the team in mind. Chapter I $\hat{\sigma}_a \sim \hat{\sigma} \cdot \sqrt{1.5}$ - SECTION D Development of the Medicine Source 29 SECTION D Development of the Medicine Source This section addresses the term of quotation/acquisition of the ostile life of a medicine process. The control product of philosophy is the part in a specific category? To achieve a specific process capacity objective, a factorization in the medicine variation would require. It is strongly recommended that this chapter is not used without reading and understanding all discussion about a medicine process. You can find examples of the multitude of possible problems that the team must address, when developing this detailed concept in "Suggested elements for a list of development verification of the medicine system" at the end of this section. Not everything Having metrology or meter laboratories within its facilities, therefore, depend on commercial/external independent laboratories to provide traceability calibration and medicine services. Much of these activities will depend on the complexity of the medicine, device or device system. VII Capitulo I Guidelines of the General Medicine System 1 section to introduction, proper and terminology 3 Introduction 3 proper 4 Terminologia 4 section B The Medication process P 13 Medicine systems 13 The effects of the variability of the system of Medicion 18 SECTION C STRATEGY AND PLANNING OF MEDICINE 29 select of Fuente de Media Media SECTION AND MEDICINE PROBLEMS 41 section F uncertainty of medication 63 SECCIIN G ANALYSIS OF MEDICINE PROBLEMS 69 section B Select/Develop test procedures 71 section C Preparation for a study of the medicine system 73 SECTION D ANALISIS OF THE RESULTS 77 CHAPTER III PR8 Recommended Cotics for replicable medicine systems 85 guidelines for 81 section An example of test procedures 83 Section B System study guidelines of variable medicine 85 guidelines to determine stability 87 guidelines for determining bias bias Mä © all of the control table 92 guidelines to determine the linearity p 96 guidelines to determine repeatability and reproducibility p 101 mä © all of rank 102 mä © all average and range 103 mä © all of variance animals (anova) 123 section C Study of Me Systems Decion of attributes 131 mä © all of risk of risk 131 SEVALE DETECTION APPROACH 143 Mä © All analytical p 145 CHAPTER IV OTHER CONCEPTS AND PHYCTICS OF MEDICINE 151 section A Practical for non -replicable medicine systems 153 systems destructive medicine 153 section B stability studies 161 Section of recognizing the effect of excessive variation within part 167 SECCIIN E mä © All average and range: Additional treatment 169 SECCIIN F Gage Performance Curve P 177 section g reduction of variation through s of multiple readings 183 section "n h Buyaciä" N Desciä "n nandar agused of grr p 185 Apä © indices 193 7. The effective documentation for any system has the same proper as a good map on a trip. 7 The acronym was originally developed by Mrs. Mary Hoskins, a metrógogo associated with Honeywell, Eli Whitney Metrology Lab and Bendix Corporation.T 8 Vä © Apä © ndex I for an alternative error model, P.I.S.M.O.E.A. If you are work piece (that is, part) I instrument p Person / procedure and environment 26. Since documentation is a form of communication, the and others must participate in all levels of the development of the documentation package of the medicine process. Medication process of the general process unfortunately, the industry has He sav the activity of medicine and animals as a "black box". F. Each calibration event includes all the necessary elements, including the standards, the medicine and proof equipment that are verified, the all and the procedures of calibration, records and qualified personnel. The worst case would be if a production meter has not been described but used. The entire data collection and maintenance recommendations related to these activities can be obtained from the original manufacturer, or developed by engineering personnel, manufacturing and quality of quality. One of the most common reasons for low quality data is too much variation. VII list of figures The work group responsible for this fourth edition were Michael Down (General Motors Corporation), Frederick Czubak (Chrysler Group LLC), Gregory Grusko (omex), Steve Stalley (Cummins, Inc.) and David Benham. The difference in the observed CP of 1.96 versus 1.28 is due to the different medicine system. For example, a 13. The excessive adjustment of the process has added variation and will continue. It can be applied all the techniques of managing, statistical and the process of process control. If the quality of the data is low, the benefit of the procedure is likely to be low. Many activities can be planned, such as the drainage of the air filters, the lubricant bearings after. Chapter I $\hat{\sigma}_a \sim \hat{\sigma} \cdot \sqrt{1.5}$ - section A Introduction, Property and Terminologia 10 Figure I-A 1: Example of a traceability chain for an NMIS length medicine With several national laboratories, meters suppliers, avant -garde manufacturing companies, etc. One of the simple ones for use is a cause and effect diagram. P 14 f see the In Figure I-B 1 as a thought initiator. As appointments are received, the equipment must meet to review and evaluate them. Will the data for control, classification, qualification, etc. use? Ä ä € § - What type of information will be provided with the meter (for example, "operational, maintenance, etc.) and what the basic skills of the operator are required? If the interaction generates too much Variation, then the quality of the data can be so low that the data is not ostile. The maps may also include the use of the statistical control of the process (SPC) to trace the long -term stability of a medicine process. Configuration instruction for the process of precious metals is an example of rule 3. Analytical studies are among the most important uses of medicine data because in last instance they lead to a better understanding of processes. Common meaning It is the guide in any case. Without training material. Eventually, it can be found that very little monitoring of parts may be required whenever the process is maintained or maintained and the medicine and monitoring of the monitoring of the maintenance and tools can be everything that is needed. This is an example of the funnel experiment that Dr. Deming used to describe the effects of manipulation. P 12 F The medicine error simply aggravates the problem. The activity of medicine and anä mtisee is a process, a medicine process. What is the variability of the expected process? Before a client asks a supplier to suggest solutions to process problems, the base and intention of the process they must be understood and anticipated by the team that has that process. The most common situation that implies the use of different instruments is the case in which the instrument used in the supplier has greater discrimination of order than the production (gage). When such is the case, it can be established as soon as possible in the APQP process so that all team members understand possible difficulties and conflicts that can be ahead and have everyone do something about it. This can be driven by the complexity of the medicine system and a decision of the team about what makes sense. It has been built as an autonomous discussion about the process of developing a package of contribution of medicine processes, obtaining responses to that package, granting the project, completing the final design, developing the medicine process and, finally, marrying that process of medicine with the production process for which it was created. Then adjust the process in an equal amount and in an opposite direction of the objective. Without this knowledge, efforts can be spent, in vain, seeking to see how badly with the new process. For example, a medicine system with a large amount of variation may not be appropriate for use in the analysis of a manufacturing process because the variation of the medicine system can mask the variation in the manufacturing process. Capä Tulo

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