

**REWORK, WAIVER, DEVIATION, REINSPECTION, FOREIGN MATERIAL, EXTENSION
TEMPLATE**

USE COMPANY LETTERHEAD FOR REQUEST

DATE: _____

Subject: (state type of request) request for (include the name of the product and lot number)
(If requesting a waiver and a rework, submit requests separately)

- 01 Type of Request: Waiver Notification Re-inspection Rework
- 02 Nature of Request: _____
- 03 Approval Required from DLA: Yes No
- 04 Contractor Name/Address: _____
- 05 Contract Number: _____
- 06 Product Name: _____
- 07 National Stock Number: _____
- 08 Batch Number (s) (If Applicable): _____
- 09 Lot Number (s): _____
- 10 Sublot (s) (If Applicable): _____
- 11 Process Category (ex. Work-in-progress/End Item): _____
- 12.a Quantities: Pouches _____ Pouches/Case _____ Cases _____ Cases/Pallet _____ Pallets _____
- 12.b Pouch integrity waivers/reworks: Manufacturing lines & equipment: Fill & seal machine(s) _____ Fill & seal line(s) _____
- 12.c Other waivers/reworks: (Provide specific details regarding the manufacturing lines when the issue is being attributed to a particular line, batch, time, etc.) _____
- 13 PCR/CID/QAP Number (Spec): _____
- 14 Sample Size; Defect; Accept/Reject: _____
- 15 Defect Classification: Critical Major Minor NA
- 16 Inspection Failure (Summary of non-conformances): _____
- 17 Failure Identified: Processing Packaging End Item
- 18 Inspector: In-plant USDA
- 19 Date of Incident: _____
- 20.a Attachments (Provide in-house and USDA worksheets): _____
- 20.b Attachments (Provide in process worksheets): _____
- 21 **Root Cause of nonconformance or deviation** (Describe using a short detailed paragraph or expand as necessary): Note: The citation of the number of nonconformances exceeding an end-item inspections acceptance number is not the identification of the root cause(s) of a nonconformance. _____
- 22 **Corrective Action** (Describe using a short detailed paragraph or expand as necessary): _____
- 23 **Preventive Action** (Describe using a short detailed paragraph or expand as necessary): Note: (Within the 30 day time limit to submit a rework, identify in your request if preventive actions were deemed necessary, and if so what preventive actions have been implemented) _____
- 24 Occurrence (Has this occurred before/when): _____
- 25 Was this lot previously reworked? If so, was it a full or partial rework? _____
- 26 Estimated Cost: _____
- 27 Effect on Delivery: _____
- 28 Justification for request: _____

Thank you,
Point of Contact Info with phone number and email address