

**First Sample Report**



- First Sample Inspection, because of:**
  - new part
  - new tool / pattern  modified tool / pattern
  - tool-description / no.: \_\_\_\_\_
  - changed drawing / specification
  - production relocation
  - from: \_\_\_\_\_ to: \_\_\_\_\_
  - change of production process (detailed explanation attached)
  - new sub-supplier
  - name of the new sub-supplier: \_\_\_\_\_
- Subsequent Sample Inspection**  
with reference to previous BITZER first sample report no.: \_\_\_\_\_
- Zero-Series Delivery / First Series Delivery**  
with reference to previous BITZER first sample report no.: \_\_\_\_\_
- Cover Sheet Sampling because of longer production stoppage**
- Inspection Report, other sample**

**Appendices**

- |  |  |  |
|--|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> 01 Dimensional Check</li> <li><input type="checkbox"/> 02 Functional Test</li> <li><input type="checkbox"/> 03 Inspection Certificate 3.2 according to EN 10204</li> <li><input type="checkbox"/> 04 Inspection Certificate 3.1 according to EN 10204</li> <li><input type="checkbox"/> 05 Test Certificate 2.2 according to EN 10204</li> <li><input type="checkbox"/> 06 Declaration of Compliance with the Order, Type 2.1</li> <li><input type="checkbox"/> 07 Other Material Certificate / Material Data Sheet</li> <li><input type="checkbox"/> 08 Catalogue Extract</li> <li><input type="checkbox"/> 09 Safety Data Sheets (e.g. for Corrosion Preservative)</li> <li>Number of Documents: _____</li> <li><input type="checkbox"/> 10 Parts Approval (TÜV / notified body)</li> <li><input type="checkbox"/> 11 Declaration of Conformity PED</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> 12 Declaration of Conformity RoHS</li> <li><input type="checkbox"/> 13 Declaration of Conformity REACH</li> <li><input type="checkbox"/> 14 Further Declarations of Conformity</li> <li>Number of Documents: _____</li> <li><input type="checkbox"/> 15 UL Approval</li> <li><input type="checkbox"/> 16 Evidence of Corrosion Resistance</li> <li><input type="checkbox"/> 17 Evidence of Surface Coating (Layer Thickness)</li> <li><input type="checkbox"/> 18 Evidence of Heat Treatment</li> <li><input type="checkbox"/> 19 Evidence of Purity, e.g. for Circuit Parts</li> <li><input type="checkbox"/> 20 Evidence of Flammability</li> <li><input type="checkbox"/> 21 Evidence of IP-Protection</li> <li><input type="checkbox"/> 22 Evidence of EMV Test</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> 23 Evidence of UV resistance</li> <li><input type="checkbox"/> 24 Authorisation for remarking</li> <li><input type="checkbox"/> 25 Process Capability Evidence</li> <li><input type="checkbox"/> 26 Control Plan</li> <li><input type="checkbox"/> 27 Table of Inspection / Test Equipment</li> <li><input type="checkbox"/> 28 Evidence of Inspection and Test Equipment Capability</li> <li><input type="checkbox"/> 29 Documentation of Packaging</li> <li><input type="checkbox"/> 30 Documentation of Tools / Pattern</li> <li><input type="checkbox"/> 31 Certificate of QM System</li> <li><input type="checkbox"/> 32 Corrective Action Plan</li> <li><input type="checkbox"/> 33 Others: _____</li> </ul> |
|--|--|--|

**Supplier Data / Inscriptions (to be completed by Supplier)**

Supplier-Number: \_\_\_\_\_

Customer-Number: \_\_\_\_\_

First Sample Report Number: \_\_\_\_\_

Part Number BITZER: \_\_\_\_\_

Part Number Supplier: \_\_\_\_\_

Part-Description: \_\_\_\_\_

3D-File Number: \_\_\_\_\_ Version: \_\_\_\_\_

Drawing Number(s): \_\_\_\_\_ Version(s): \_\_\_\_\_

Order Number: \_\_\_\_\_

Order Date: \_\_\_\_\_

Delivery Note Number: \_\_\_\_\_

Delivery Note Date: \_\_\_\_\_

Quantity Delivered: \_\_\_\_\_

Charge Number: \_\_\_\_\_

Sample Weight: \_\_\_\_\_

IMDS-ID-Number: \_\_\_\_\_

Herewith the supplier confirms,

- that the presented samples are manufactured with serial equipment and serial conditions.
- the correct processing of this first sample inspection and its description in this first sample report (deviations are noticed in this report especially).
- that a release does not absolve the supplier from the responsibility to deliver according to valid drawings and dimensions, and to observe the respective function rules.

Comment: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_

**BITZER Data / Inscriptions (to be completed by BITZER)**

Supplier-Number: \_\_\_\_\_

First Sample Report Number: \_\_\_\_\_

Part Number BITZER: \_\_\_\_\_

Part-Description: \_\_\_\_\_

3D-File Number: \_\_\_\_\_ Version: \_\_\_\_\_

Drawing Number(s): \_\_\_\_\_ Version(s): \_\_\_\_\_

Order Number: \_\_\_\_\_

Delivery Date: \_\_\_\_\_

Material Document Number (Incoming Goods): \_\_\_\_\_

Inspection Lot Number: \_\_\_\_\_

Delivery Destination / Unloading Point: \_\_\_\_\_

**Decision - BITZER**

		According to Appendix:																																		
		01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33		
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"/>	<input type="checkbox"/>
NOK	<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"/>	<input type="checkbox"/>

**Overall:**

- Sample Release**
- Zero-Series Release**
- Series Release**
- rejected, new samples necessary**

Comment: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

This document has been created digitally and is valid without a signature.