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| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Supplier Nonconformance Report (NCR) | | | | | | NCR- **Date:**  **Page:** |
| **Subcontractor Name:**  **Contact Name:**  **Address:**  **E-mail:**  **Phone:** | | | | | **Subcontract No.:**  **Description:** | | |
| **Part Number:** | | | | **Revision:** | **Quantity:** | | |
| **Part Name:** | | | | **Additional Information/Identification:** | | | |
| **Serial Number(s)/Lot No./Quantity Affected**: | | | | **LLNS Furnished Material?**  **Yes**  **No** | | | |
| **Description of Nonconformance:** (1) List requirement(s) affected (e.g., specification, drawing), and (2) List discrepancies to requirement(s). | | | | | | | |
| **Investigation/Technical Comments:** (1) List cause of discrepancy, and (2) List corrective action taken to prevent recurrence. | | | | | | | |
| **Supplier Disposition Recommendation:** | | | | | | | |
| LLNS Disposition | | | | | | | |
| **Use-As-Is** | |  | **LLNS Responsible Engineer:** | | | **Date:** | |
| **Rejected/Unacceptable** | |  | **LLNS Quality Representative:** | | | **Date:** | |
| **Rework/Repair** | |  | **LLNS Technical Representative:** | | | **Date:** | |
| **Use with Restriction(s)** | |  | **LLNS Contract Analyst:** | | | **Date:** | |