



Concession Request

Send the request to: qualityassurance@oerlikon.com

Supplier:	Supplier Number:	Date:
	Name of the applicant:	Contact person Oerlikon Balzers:
Order number: Ite	m number:	Product description:
	t quantity:	
		Nominal: Actual :
Delivery quantity: Description/ Justificadbbtion of aberration with reasons and messures:		
Legally binding signature/ Post of the supplier delegates:		
Department(Supplier):	Date:	
Верагипенцоврног).	Date.	
Phone number:	Elect/Sign*:	
Remark:		
This approval disengages a supplier at no measure from his contractual commitment. All properties or product characteristics which are not affected from this concession have to adhere to the specifications and/ or to already tested and approved samples. The supplier is responsible for the applied concessions, if the originally applied function and/ or characteristics of the product are not negatively influenced.		
Concession decision (to be completed from Oerlikon)		
Approval procedure: Adaption number:		
Approval? □ YES □ NO		
Justification and possible bearings for this concession:		
Approved quantity:	Reprieved of period:	
Responsible Technical department of Oerlikon: Decision / Date: /	F1==4/0:+	
Hecision / Hate.	Fiect/Sign**	
Responsible Sales department of Oerlikon: Decision / Date: / Elect/Sign*:		
Decision / Date: /	Elect/Sign*:	
Responsible Quality Assurance department of Oerlikon:		
Date:	Elect/Sign*:	

* Form for electronical sign. That means, that they which put their names in the correlative field sign it with them. This people who put another name in the correlative field commit a sign forgery.