

## TEXTRON SYSTEMS FAILURE ANALYSIS REQUEST

**TEXTRON SYSTEMS PO NUMBER(S):**

**LINE NUMBER(S):**

**RETURN COMPLETED FORM TO SUPPLIERQUALITY@TEXTRONSYSTEMS.COM**

Company Name		Textron Systems NC Number	
Company Address		Textron Systems Part Number	
Telephone Number		Supplier Part Number	
Contact Name		Textron Systems Serial Number	
Date Item Received		Supplier Serial Number	
DJ Number		Date Repair Completed	
Textron Systems Customer PO Number		Packing List Number	

Briefly describe the reported failure of the item:			
Summarize the condition of unit as received including any evidence of mishandling, carrier or field induced damage. Include observations of any alterations to the unit including removal of tamper proof seal, if applicable. Include photos as appropriate.			
Was the failure verified visually or tested before any action was performed? If the evaluation of the unit is found to be "No Problem Found", describe the evaluation that led to that decision.	Failure Confirmed	No Problem Found	Other Fault Found

Briefly describe what was wrong with the item:	
What was done to repair the item?	

Name of Part Needed to Repair Item	Part Number of Item	Quantity	S/N or Batch	Name of Part Needed to Repair Item	Part Number of Item	Quantity	S/N or Batch

Are other items or Serial Numbers at risk? If so, please identify these.
Is this defect product related? Describe the evaluation that led to that decision.

If this defect is product related, what is the root cause?
If this defect is product related, what Containment Action was performed? Describe any screening of stock, WIP or finished goods that was performed. Identify any impact to previous delivered units or need for rework or recall, as appropriate.
If this defect is product related, what Corrective Action has been taken to eliminate the NC?
If this defect is product related, what Preventative Action (Steps are being taken to prevent a nonconformance reoccurrence)

ADDITIONAL COMMENTS:

Prepared By (Print and Sign) \_\_\_\_\_

Date \_\_\_\_\_