

Quality- Non-Conformance Report (NCR)

PLEASE ENSURE ALL FIELDS ARE COMPLETED - ANY APPLICABLE CREDITS CANNOT BE PROCESSED IF FULL INFORMATION HAS NOT BEEN PROVIDED

What type of issue are you reporting?: Quality/Product Failure Supply/Shipping Error

Customer Name: Distributor:

Contact Person: Country: Date:

BFM® Part #	Description of Part	BFM® Batch #	BFM® Sales Order #	Quantity

Reason for complaint:

What application was the part being used for? How long has the part been working?

Is this a new installation? Yes No If no, how long did the previous connector last in this application?

Temperature & Pressure: Processing Temperature: °C Temperatures at point of BFM® fitting: °C Pressure in pipework: PSI Vacuum in pipework: PSI

Is Chemical attack possible? Yes No Name of Acid/Caustic used in process:

Acid % Concentration Caustic % Concentration Basic % Concentration pH level (if known):

Installation Gap (IG) & Offset: Current IG (space between spigots): mm Pipework Offset: mm

Type of Movement: Vibrating Oscillating None (static) Amount of Movement: Maximum Horizontal (sideways in either direction from a fixed point) mm Maximum Vertical (up and down) mm

Description of Vibrating or Oscillating Equipment:

Completed the form?
Please confirm that you will also be sending us the following:
 Photographs clearly showing the issue Video of the issue if possible
(Please include your company name in all the file names)

Save and email the completed form and your photos/videos to:
quality@bfmfitting.com

BFM®'s Response (to be completed by BFM® on review of all information provided)

BFM®'s Comments:

BFM® Corrective Action to be Taken: (if applicable)

INTERNAL USE ONLY

Credit: Yes No Replacement: Yes No Approved By: Date: