



CONTROLLED DOCUMENT
 IF PRINTED IN COLOR

DEVIATION REQUEST

* Yellow sections are Jireh-filled only

Email to: deviation100@jirehmetal.com

DEVIATION NO: _____	PART NUMBER(S) AFFECTED: _____
ISSUE DATE: _____	DRAWING REVISION: _____
	PART SPECIFICATION: _____

REQUESTED BY:
 SUPPLIER NAME:
 CONTACT NAME:
 DATE:

DEVIATION REQUESTED:

REASON FOR DEVIATION:

COMMENTS:

DURATION OF DEVIATION: (PCS)	COSTS ASSOCIATED WITH REQUEST:
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DEVIATION REQUEST CONDITIONS OF APPROVAL:

JIREH APPROVALS:	YES	NO		SIGN AND DATE
QUALITY				
ENGINEERING				
TOOLING				
OPERATIONS				
PURCHASING				