API Technologies Corp.
Form: 34-0918-00
Failure Analysis/8D Corrective Action Plan

<table>
<tr><td colspan="3">Verbiage in italic font is intended to be used as an aide in the RCCA process and use only for informational purposes.</td><td>Corrective Action #:</td></tr>
<tr><td colspan="2">Assigned to:</td><td colspan="3">Failure Analysis Team Members:</td></tr>
<tr><td colspan="2" rowspan="2">Type of Corrective Action Response:</td><td>☐Customer Complaint</td><td>☐Customer Return</td><td>☐API Supplier (SCAR)</td></tr>
<tr><td>☐ Internal Process</td><td>☐ Internal Systems</td><td>☐ External Systems Audit</td></tr>
<tr><td colspan="2" rowspan="2">API Part Number:</td><td>RMA/CC#:</td><td>DR#:</td><td rowspan="3">Other pertinent info:</td></tr>
<tr><td>Return Qty:</td><td>Vendor #:</td></tr>
<tr><td>Date Corrective Action Request <u>Received:</u></td><td>Date Corrective Action response <u>Due:</u></td><td>Customer Name:</td><td>Vendor Name:</td></tr>
</table>

Discipline 1: Description of Problem *(include customer reference # where applicable)*

Discipline 2: Verification of stated non-conformance

☐The discrepancy has been verified. ☐The discrepancy has not been verified.

Verification comments:

Discipline 3: Failure Analysis *(What failure analysis method was used to determine root cause? Examples: 5 Why, Fishbone Diagram, Testing, Manufacturing Record review, etc. Attach or include as appropriate)*

Discipline 4: Root Cause Identification *(Identify all applicable causes that could explain why the problem occurred)*

When applicable, consider and document human factors related to this nonconformance/problem.
(Human factors involve gathering information about human abilities, limitations, and other characteristics and applying it to tools, machines, systems, tasks, jobs, and environments to produce safe, comfortable, and effective human use. Recognize that people performing tasks can be affected by fatigue, lack of concentration, distraction, pressure, stress, lack of awareness, etc.)
Problem Statement (Summarized for D1):

1. Why did this non-conformance/problem occur?
2. Why did (1) happen?
3. Why did (2) described above happen?
4. Why did (3) described above happen?
5. Why did (4) described above happen?

Based on 1-5; what is the root cause(s) of the non-conformance/problem?

Discipline 5: Disposition of Material ☐Customer ☐API Supplier ☐ API internal ☐ Not applicable
Comments:

Returned Material			Stock			WIP		
Total qty returned:		Date	Total qty in Stock:		Date	Total qty in WIP:		Date
☐ Scrap ☐ Sort ☐ Re-Build ☐ Return "as is" ☐ Re-Stock ☐ Rework ☐ Rework at Customer cost	Qty Qty Qty Qty Qty Qty Qty		☐ Scrap ☐ Sort ☐ Re-Build ☐ Acceptable ☐ Rework ☐ Rework at Customer cost	Qty Qty Qty Qty Qty Qty		☐ Scrap ☐ Sort ☐ Re-Build ☐ Acceptable ☐ Rework ☐ Rework at Customer cost	Qty Qty Qty Qty Qty Qty	

Discipline 6: Containment Plan *(Define and implement containment actions to isolate the problem until permanent actions are in place; What, Who, When)*

Discipline 7: Preventive Plan /Long Term Corrective Action to prevent re-occurrence *(What actions need to take place to prevent re-occurrence; What, Who, When)*

For API use only:

Is the discrepant product controlled by a Safety Agency, such as TUV, UL, or CSA? ☐ Yes ☐ No

Does this discrepancy affect consumer safety? ☐ Yes ☐ No

If both questions are answered yes, then the Divisional Manager of Quality must notify the safety agency.

Contact date:

Corrective Action Impact: Where applicable, apply corrective actions taken as a result of this response to similar products and processes.

☐Applies ☐ Does not apply

List Part Numbers and Values Streams:

For API Use Only:

Is this CAR related to an internal and external system audit finding: ☐ Yes ☐ No

If yes, then share this RCCA with other API sites by placing it in the API Quality SharePoint site.

Comments:

Change Notice # (where applicable):	CAR effectivity date:
Training Record # (where applicable):	Training date:
Analysis performed by:	Date complete:
Approval/Signature:	Approval date:
Mgr of Quality approval/Signature:	Approval date:

Discipline 8: Verification of Corrective Action Effectiveness (*document what type of actions need to be taken to verify effectiveness of the corrective action)*

Verification of effectiveness may be accomplished by: (check one or more)

1. ☐ Customer follow up (Customer Feedback System)
2. ☐ Utilizing the QA Alert system per AT 35-7036, Quality Alert Procedure (KBM)
3. ☐ Performing follow up activities to ensure that the corrective action has been effective

Verification of CAR Effectiveness Performed by:	Verification Date:

Provide details concerning the method (s) used to determine effectiveness here:

➢This process has been re-written, in order to understand the nature of the changes the entire document must be reviewed.