

**Standard Motor Products, Inc.**

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 Web Site: www.smpoe.com

Sub-Contractor Corrective Action Request "SCAR"

Date Issued: SCAR Ref. Number:

DNCAR Number: SMP-I Part Number:

Supplier Name:

COPICS Supplier Code: Supplier Contact:

Requested Action:

SMP-I Contact: Phone #:

Fax #: EMail Address:

Attachments: DNCAR Samples Inspection Results
 8-D Form Other _____

Sub-Contractor:

You are hereby advised that the material or service described in these documents was found to be non-conforming. If the disposition stated on the attached DNCAR was **RTV** (Return To Vendor) please immediately supply a **Return Authorization Number** and shipping instructions to your **SMP-I buyer contact**.

NOTE: This SCAR was initiated by the SMP-I contact person named above. All responses to this SCAR are to be directed back to the contact named above. When the 8-D block above is checked the SCAR response must be placed on the attached 8-D form. If the 8-D block is not checked the response can be in any format chosen by the sub-contractor. When using the 8-D form supplied the form can be expanded to multiple pages as necessary for inclusion of all associated information, corrective actions and evaluations. **Caution**, it is imperative that the root cause be determined and actions are taken to preclude future incidences of this non-conformance. The initial response to this SCAR, including confirmation of suspect material containment and short term corrective actions must be provided to your SMP-I contact **within 24 hours** of receipt of this SCAR. A completed response including root cause analysis and preventative actions must be provided to SMP-I within **10 working days**. Include with the response the names of the person(s) providing the response and their contact information: Email Address, Phone Number, FAX Number, Location and Address.

Thank You for Your Help With this Non-Conformance