

**KANEPACKAGE PHILIPPINE INC.**

No. 5 Ring Road LISP II, Brgy. La Mesa, Calamba City, Laguna
Telephone No. (049) 545-7166 to 69
Fax No. (049) 545-6302

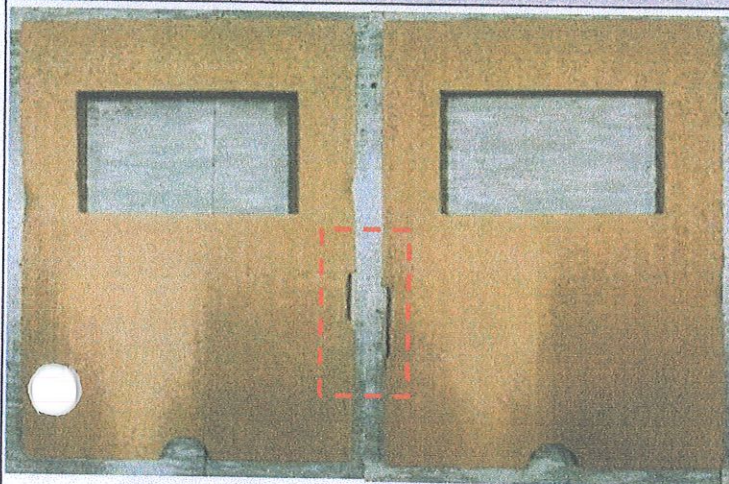
INVESTIGATION REPORT FORM (IRF)☒ Inhouse Detection☐ Customer Claim

Control No.: 327

Date Issued: 20 11 17

Customer: NIDEC SUBIC
Item Code: VR-B RYZX000001
Item Description: PAD B
Job Order Number: WO-SO-IPD-1486-17

Attention To: Mr. Gerald De Guzman
Department: PRODUCTION
Date of Detection: 20 11 16
Section Detected: QA - SCREENING

ILLUSTRATION OF THE PROBLEM☐ Major☒ Minor

Lot Quantity (pcs.):

2030

Reject Quantity (pcs.):

64

Reject Percentage

3.15%

Nature of Defect:

BURSTING

Requirement:

No bursting on the surface of the item

Actual:

W/ bursting on the rough surface

NO. OF OCCURRENCE☒ First
☐ Recurrence

No.: _____

Date: _____

DISPOSITION

☐ Hold
☐ Special Acceptance
☐ For Rework
☒ Reject / Disposal

AREA OF OCCURRENCE / ORIGIN

☐ Slotter ☐ Gluing
☐ EQOS ☐ Vertical
☒ Diecut ☐ Others: _____
☐ Detaching

CONTENT

☐ Material
☐ Dimension
☒ Appearance
☐ Process / Method

Issued by

Checked by

Approved by

Received by
(Receiving Section)

Adrian Vergara
QA-IE Staff

Ms. Noemi Cepeda
QA Supervisor

Mr. Rexel Almario
QA Asst. Manager

Mr. Gerald De Guzman
Head/ Supervisor

I. INVESTIGATION / ANALYSIS**DIRECT CAUSE:** (Analyze the reason of occurrence, why it happened?)**INDIRECT CAUSE:** (Analyze the reason of occurrence, why it leaked?)

System / Training

Why 1:
Why 2:
Why 3:
Why 4:
Why 5:

N/A

Why 1:
Why 2:
Why 3:
Why 4:
Why 5:

N/A

Design / Toolings

Why 1:
Why 2:
Why 3:
Why 4:
Why 5:

N/A

Why 1:
Why 2:
Why 3:
Why 4:
Why 5:

N/A

Process / Material

Why 1:
Why 2:
Why 3:
Why 4:
Why 5:

PLS. SEE ATTACHED

Why 1:
Why 2:
Why 3:
Why 4:
Why 5:

PLS. SEE ATTACHED

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INVESTIGATION REPORT FORM (IRF)**FINAL CONCLUSION****OCCURRENCE ROOTCAUSE**

- BRITTLE OR WEAK KRAFT LINER

OUTFLOW ROOTCAUSE

- RANDOMLY OCCURRENCE

IMMEDIATE ACTION: (Action to be done to contain/ temporary correct the problem found)

CORRECTIVE ACTION: (Actions to be done to ensure that the problem will not happen again)

A. Sorting Result

	Location	Total Stock	NG	Total Good
RM	N/A			
WIP	N/A			
FG	N/A			

Actions to be done to eliminate recurrence**Who / When****System**

N/A

B. Orientation

Date	N/A	Time	N/A
Title	N/A		
Access	N/A		

Design / Tools

N/A

C. Reworking

Rework Quantity	N/A
Total Good	N/A
Rework Percentage (Good)	N/A

Process

PLS. SEE ATTACHED

II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)**Date Conducted:** 20 11 18**PIC:** A. Vergara**Identified Rootcause**

> Brittle materials
> Tight impression of diecut blade to corrugated boards since the ejector used is gray sponge

Recommendation**III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)**

	Checked by	Date	Implemented?	Remarks
1st Verification of Action	A. Vergara	20 11 20	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	C.A. is implemented
2nd Verification of Action			<input type="checkbox"/> Yes <input type="checkbox"/> No	
3rd Verification of Action			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Effectiveness of Action	A. Vergara	21 09 14	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	C.A. is effective

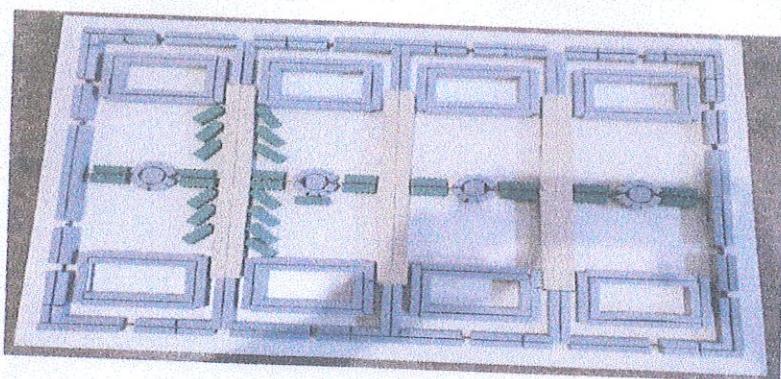
Note: If no same defects / problems occurs for 5 consecutive deliveries, corrective action is considered effective / closed. If the same problem occurs within 5 consecutive deliveries or 3rd verification of action still not yet implemented, Investigation Report shall be re-issued to the affected department to provide new improvement action.

IV. CLOSURE

QUALITY ASSURANCE DEPARTMENT		Approved by:		Process Owner Acknowledgment: (Receiving Section)	
<input checked="" type="checkbox"/> Closed	CLOSED	<input type="checkbox"/> Still Open		<input checked="" type="checkbox"/> Line Leader	
<input type="checkbox"/> Re-Issue IRF		<input type="checkbox"/> QA Supervisor		<input type="checkbox"/> QA Asst. Manager	
Date: 21 09 15		Date: 21 09 15		Date: 21 09 15	
DATE AND SIGNATURE 21 09 15					

INVESTIGATION REPORT FOR BURSTING OF NIDEC SUBIC VR-B RYZX000001 PAD B

DIRECT CAUSE PROCESS/MATERIAL	W1- Blade layout is within standard using gray sponge.
	W2- Possible the brittle or weak Kraft Liner is the cause of bursting.
	W3 - Brittle or weak Kraft liner specially if CB-flute materials is prone in bursting.



INDIRECT CAUSE (OUTFLOW) PROCESS/MATERIAL	W1- Diecut operator proceed to mass production because trial run approved by ME.
	W2- Operator do some remedy if they encounter bursting.
	W3- Operator did not trap the bursting during sampling because possible its occurs randomly.

PRODUCTION CORRECTIVE ACTION

Re-layout the die-blade using 13-15mm Eperan cushion, as one of the countermeasure in bursting.

PIC:	PRODUCTION	TARGET DATE:	201120
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PREPARED BY:

[Signature] 2011/9
GERALD DE GUZMAN
PROD ASST. SUPERVISOR

APPROVED BY:

[Signature] 2011/9
WEENA V. APALLA
SR. SUPERVISOR