


**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

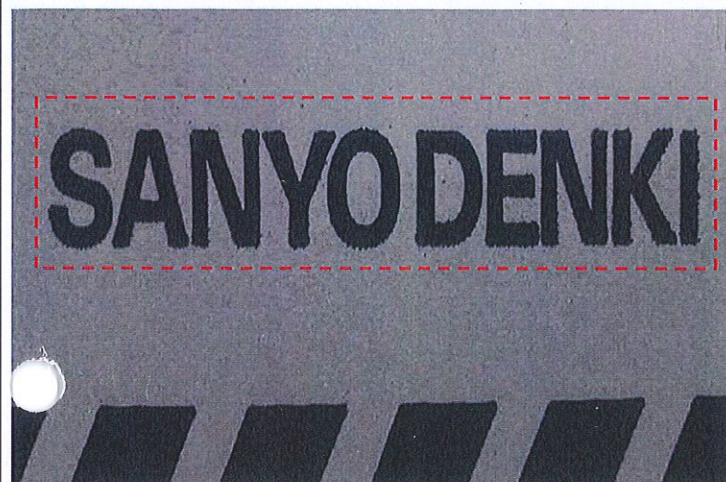
**INVESTIGATION REPORT FORM (IRF)**
☒ Inhouse Detection

☐ Customer Claim

Control No.: 408

Date Issued: 21 04 05

Customer	SANYO DENKI	Attention To	Mr. Gerald De Guzman
Item Code	00939007-01	Department	PRODUCTION
Item Description	CORRUGATED CARTON	Date of Detection	21 03 24
Job Order Number	JO21-M-00203-17	Section Detected	QA - SCREENING

**ILLUSTRATION OF THE PROBLEM**


<input type="checkbox"/> Major <input checked="" type="checkbox"/> Minor		
Lot Quantity (pcs.)	Reject Quantity (pcs.)	Reject Percentage
2500	94	3.76%
Nature of Defect:		
SMEARED PRINT		
Requirement:		
No smear print		
Actual:		
W/ Smeared print on the logo		

NO. OF OCCURRENCE	DISPOSITION	AREA OF OCCURRENCE / ORIGIN		CONTENT
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: _____ Date: _____	<input type="checkbox"/> Hold <input type="checkbox"/> Special Acceptance <input type="checkbox"/> For Rework <input checked="" type="checkbox"/> Reject / Disposal	<input type="checkbox"/> Slotter <input checked="" type="checkbox"/> EQOS <input type="checkbox"/> Diecut <input type="checkbox"/> Detaching	<input type="checkbox"/> Gluing <input type="checkbox"/> Vertical <input type="checkbox"/> Others: _____	<input type="checkbox"/> Material <input checked="" type="checkbox"/> Dimension <input type="checkbox"/> Appearance <input type="checkbox"/> Process / Method
Issued by	Checked by	Approved by	Received by (Receiving Section)	
 Adrian Vergara QA-IE Staff	 Mr. Roderick Ramos QA Supervisor	 Mr. Rexel Almanor 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: N/A Why 4: Why 5:	Why 1: Why 2: Why 3: N/A Why 4: Why 5:	Why 1: Why 2: Why 3: N/A Why 4: Why 5:
Design / Toolings	Why 1: Why 2: Why 3: N/A Why 4: Why 5:	Why 1: Why 2: Why 3: N/A Why 4: Why 5:	Why 1: Why 2: Why 3: N/A Why 4: Why 5:
Process / Material	Why 1: Why 2: Why 3: PLS. SEE ATTACHED Why 4: Why 5:	Why 1: Why 2: Why 3: PLS. SEE ATTACHED Why 4: Why 5:	Why 1: Why 2: Why 3: PLS. SEE ATTACHED Why 4: Why 5:



**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)****FINAL CONCLUSION****OCCURRENCE ROOTCAUSE****OUTFLOW ROOTCAUSE**

— UNEVEN DISTRIBUTION OF WATER  
IN SHOWER NOZZLE

— Rampdown

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

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

**B. Orientation**

Date	N/A	Time	N/A		Design / Tools	N/A	
Title	N/A						
Issues	N/A						

**C. Reworking**

Rework Quantity	N/A		Process	PLS. SEE ATTACHED	
Total Good	N/A				
Rework Percentage (Good)	N/A				

**II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)**

Date Conducted: 21 04 06

PIC: A. Vergara

**Identified Rootcause****Recommendation**

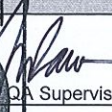
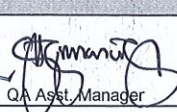
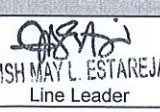

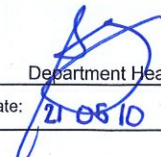
> Due to uneven water distribution

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

	Checked by	Date	Implemented?	Remarks
1st Verification of Action	A. Vergara	21 04 06	[X] Yes [ ] No	C.A. is implemented
2nd Verification of Action			[ ] Yes [ ] No	
3rd Verification of Action			[ ] Yes [ ] No	
Effectiveness of Action	A. Vergara	21 05 07	[X] Yes [ ] 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**

<b>QUALITY ASSURANCE DEPARTMENT</b>		Approved by:		Process Owner Acknowledgment: (Receiving Section)	
<input checked="" type="checkbox"/> Closed	<input type="checkbox"/> Still Open	<input type="checkbox"/> Re-Issue IRF	 QA Supervisor Date: 21 05 10	 QA Asst. Manager Date: 21 05 10	 IRISH MAY L. ESTAREJA Line Leader Date: 21 05 10
DATE AND SIGNATURE  21 05 07			 Department Head Date: 21 05 10		



## INVESTIGATION REPORT FOR SMEARED PRINT OF SANYO DENKI 00939007-01 CORRUGATED CARTON

<b>DIRECT CAUSE PROCESS/MATERIAL</b>	W1- The uneven distribution of water in shower nozzle is the caused of smeared print.
	W2- Due to uneven distribution of water, the ink viscosity get high during mass production that caused smeared and blotted print.
	W3- Affected items processed last March 21, 2021, while the shower nozzle replaced March 24,2021.

<b>INDIRECT CAUSE (OUTFLOW)</b>	W1- Operator did not notice the smeared print during sampling since the occurrence is randomly and no signal from QA Patrol to stop the process.
---	--

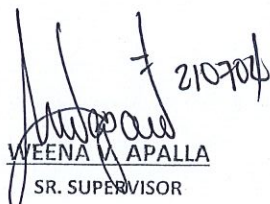
### PRODUCTION CORRECTIVE ACTION

Monitor this item next running since the shower nozzle are replaced last March 24, 2021			
PIC:	PRODUCTION	TARGET DATE:	210406

PREPARED BY:

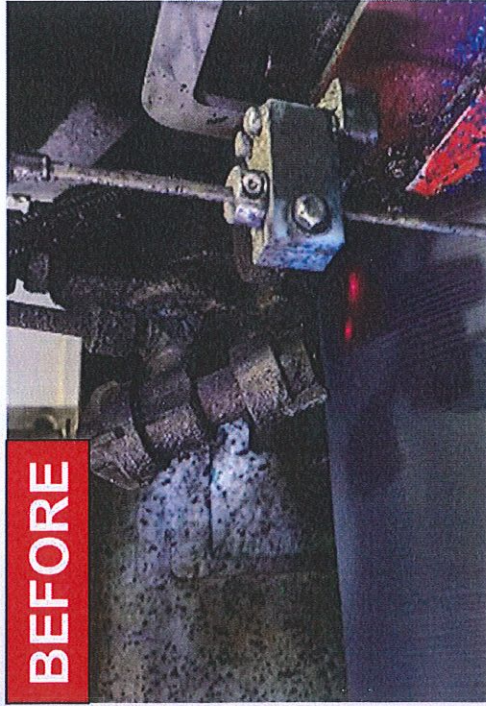
  
 GERALD DE GUZMAN  
 PROD ASST. SUPERVISOR

APPROVED BY:

  
 WEENA M. APALLA  
 SR. SUPERVISOR



# UPDATES:

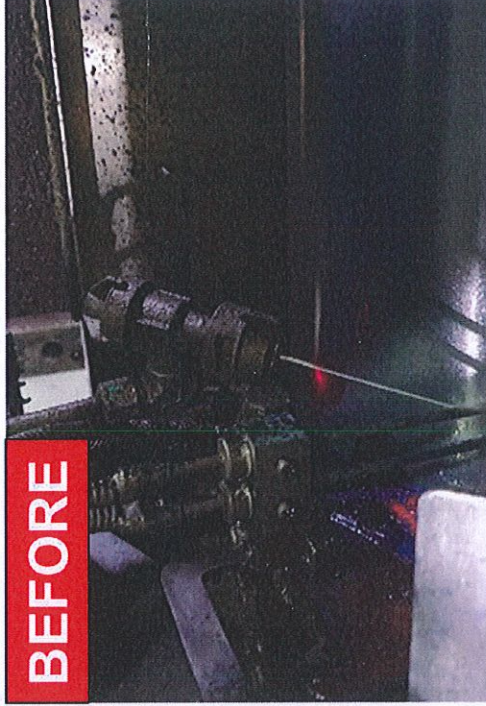


**BEFORE**

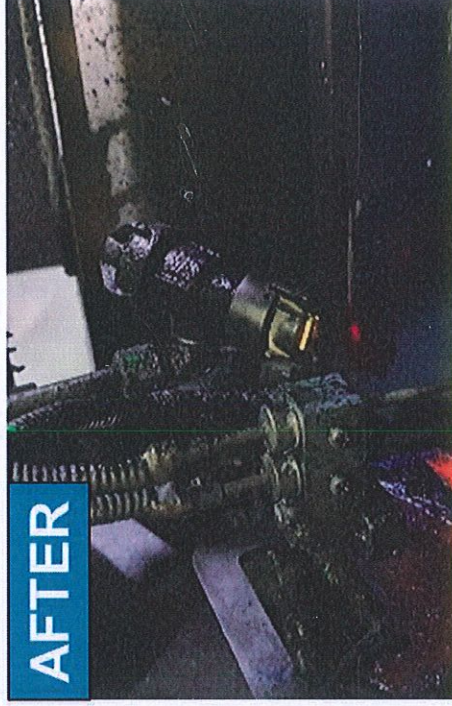


**AFTER**

**LEFT NOZZLE**



**BEFORE**



**AFTER**

**RIGHT NOZZLE**

## **REMARKS:**

>The nozzles were replaced because they produced water with uneven volumes

>For checking of effectiveness