

**KANEPACKAGE PHILIPPINE INC.**

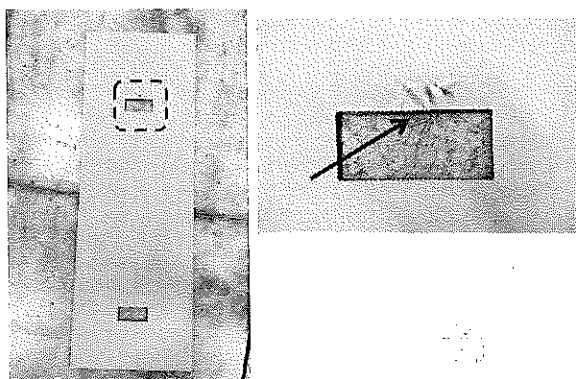
No. 5 Ring Road LTSP II, Brgy. La Mesa, Calamba City, Laguna  
Telephone No. (049) 545-7166 to 69  
Fax No. (049) 545-6302

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

Control No.: IRF-23-08-0070

Date Issued: 11-Aug-23

Customer	EPI	Attention To	NOEMI CEPEDA
Item Code	5162250-00	Department	KPLIMA- PRODUCTION
Item Description	LOUVRE 2 FJX ICB FOR PAD SLEEVE	Date of Detection	230810
Job Order Number	42041	Section Detected	DETACHING PRODUCTION

**ILLUSTRATION OF THE PROBLEM**☐ Major ☒ Minor

Lot Quantity (pcs.)	Reject Quantity (pcs.)	Reject Percentage
3,000	206	6.87%

**Nature of Defect:**

PEEL OFF

ITEM SHOULD BE IN GOOD CONDITION; NO OCCURRENCE OF PEEL OFF

**Actual:**PEEL OFF WAS ENCOUNTERED ON THE ITEM  
(PLEASE SEE ATTACHED PICTURE)

NO. OF OCCURRENCE	DISPOSITION	AREA OF OCCURRENCE / ORIGIN	CONTENT
<input checked="" type="checkbox"/> First	<input type="checkbox"/> Hold	<input type="checkbox"/> Slotter	<input type="checkbox"/> Material
<input type="checkbox"/> Recurrence	<input type="checkbox"/> Special Acceptance	<input type="checkbox"/> EQOS	<input type="checkbox"/> Dimension
No.:	<input type="checkbox"/> For Rework	<input type="checkbox"/> Diecut	<input type="checkbox"/> Appearance
Date:	<input checked="" type="checkbox"/> Reject / Disposal	<input checked="" type="checkbox"/> Detaching	<input checked="" type="checkbox"/> Process / Method
Issued by	Checked by	Approved by	Received by (Retaining Section)
C. Arevalo QA-IE Staff	G. Magsino QA Supervisor	QA Asst. Manager	N. Cepeda 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 1:
	Why 2:		Why 2:
	Why 3:		Why 3:
	Why 4:		Why 4:
	Why 5:		Why 5:
Design / Toolings	Why 1:		Why 1:
	Why 2:		Why 2:
	Why 3:		Why 3:
	Why 4:		Why 4:
	Why 5:		Why 5:
Process / Material	Why 1:		Why 1:
	Why 2:		Why 2:
	Why 3:		Why 3:
	Why 4:		Why 4:
	Why 5:		Why 5:

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

OCCURRENCE ROOTCAUSE					OUTFLOW ROOTCAUSE		
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)		
<b>A. Sorting Result</b>					Actions to be done to eliminate recurrence		Who / When
	Location	Total Stock	NG	Total Good	System		
RM							
WIP							
FG							
<b>B. Orientation</b>					Design / Tools		
Date		Time					
Title							
Attendees							
<b>C. Reworking</b>					Process		
Rework Quantity							
Total Good							
Rework Percentage (Good)							
<b>II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)</b>					Date Conducted: _____ PIC: _____		
Identified Rootcause					Recommendation		
<b>III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)</b>							
	Checked by	Date	Implemented?		Remarks		
1st Verification of Action			[ ] Yes [ ] No				
2nd Verification of Action			[ ] Yes [ ] No				
3rd Verification of Action			[ ] Yes [ ] No				
Effectiveness of Action			[ ] Yes [ ] No				
<i>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.</i>							
<b>IV. CLOSURE</b>							
Status:	Remarks:		Approved by:		Process Owner Acknowledgment: (Receiving Section)		
<input type="checkbox"/> Closed	Initial requirement of EPPI= 168 pcs. No available RM Stocks of SF Next Plan: Possible December 2023						
<input type="checkbox"/> Still Open			QA Supervisor	QA Asst. Manager	Line Leader	Department Head	
<input type="checkbox"/> Re-Issue IRF			Date:	Date:	Date:	Date:	