

Automotive Part Re-Design Notification

Notification Number:

Date:

Prepared By:

Department:

Part Information

Part Name:

Part Number:

Current Revision:

New Revision:

Affected Vehicle Model(s):

Reason for Re-Design

Summary of Changes

Previous Design	New Design	Impact

Implementation Plan

Effective Date:

Responsible Person:

Remarks:

Approvals

Name	Department	Signature	Date