

BOM Change Approval Form

Project / Product Name

BOM Number

Requested By

Date

Description of Change

BOM Items Affected

Item No.	Part Number	Current Description	Current Qty	Proposed Change

Justification for Change

Impact Assessment (Cost, Lead Time, Inventory, etc.)

Departments Notified / Consulted

Approvals

Role	Name	Signature	Date
Engineering			
Purchasing			
Production			

QA / QC			
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