

Supplier Training



Engineering Change Request (ECR) Process Guide

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Engineering Change Request Instructions

- Download the ECR Form (F-400) from the Marvin Group Portal in the Documents Folder
- Perform Save As

File name: **F-400 Engineering Change Request (6)**


Save as type: Word Document

- Rename the document as follows:

ECR_Part Number_ Date

File name: **ECR_124839201_20200218**

Save as type: Word Document



MARVIN ENGINEERING CO., INC.
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Phone (310) 674-5030 • Fax (310) 673-9472

ENGINEERING CHANGE REQUEST
ENGINEERING, PLANNING AND INFORMATION REQUEST

ER #

REQUESTER SECTION									
PART INFO							DATE		
1. DOCUMENT NUMBER: 		2. REV 	3. DASH 	3. DASH 	3. DASH 	3. DASH 	6. PROGRAM MANAGER: 		
4. DRAWING/DOCUMENT TITLE: 		5. NEXT HIGHER ASSEMBLY: 				7. QUALITY ENGINEER: 			
REQUESTER					PROJECT				
8. REQUESTER: 		9. REQUESTER PHONE / EXT. 			14. PO# 		15. QUANTITY: 		16. TYPE
10. NEED DATE: 		11. REQUESTER EMAIL: 			17. IPT: 		18. PROGRAM: 		
12. CONTRACT NUMBER: 		13. REASON FOR ECR 			SCHEDULE IMPACT? <input type="checkbox"/> 19. NO <input type="checkbox"/> 20. YES 21. DATE: 				
22. NATURE OF REQUEST COMPLETELY DEFINE THE ISSUE, INCLUDING SKETCH IF NECESSARY. SUGGEST A SOLUTION; GIVE A PRECISE REASON FOR THE REQUEST. 									
23. N/A		24. N/A		25. N/A		26. N/A		27. N/A	
28. N/A		29. N/A		30. N/A		31. N/A		32. N/A	
DISPOSITIONER SECTION									
29. RECEIVED BY: 		30. PHONE / EXT: 		31. DATE: 		32. ASSIGNED TO: 		33. PHONE / EXT: 	
34. DATE: 		35. PART CLASSIFICATION 		36. ECR DISPOSITION 					
DISPOSITION REQUIREMENTS (CHECK ALL THAT APPLY)									
<input type="checkbox"/> 39. CUSTOMER AUTHORIZATION <input type="checkbox"/> 40. NO PROGRAMMING CHANGE <input type="checkbox"/> 41. CREATE/REVISE MEC DRAWINGS <input type="checkbox"/> 42. CREATE/REVISE TOOL DRAWINGS <input type="checkbox"/> 43. PURCHASE ORDER CHANGE REQUIRED <input type="checkbox"/> 44. CREATE REWORK PLANNING					<input type="checkbox"/> 45. REVISE MASTER/PRODUCTION ORDER <input type="checkbox"/> 46. NO ECM REQUIRED <input type="checkbox"/> 47. CCB REQUIRED <input type="checkbox"/> 48. NO CHANGE REQUIRED <input type="checkbox"/> 49. OTHER 				
50. DETAILED DISPOSITION 									
<input type="checkbox"/> CONTINUATION SHEET		<input type="checkbox"/> ATTACHMENTS		51. REASON CODE: 			52. ESTIMATED COMPLETION DATE: 		

Engineering Change Request Instructions

- Requester Section must be filled out correctly

REQUESTER SECTION							
PART INFO							DATE
1. DOCUMENT NUMBER: <input type="text"/>	2. REV <input type="text"/>	3. DASH <input type="text"/>	3. DASH <input type="text"/>	3. DASH <input type="text"/>	3. DASH <input type="text"/>	6. PROGRAM MANAGER: <input type="text"/>	<input type="text"/>
4. DRAWING/DOCUMENT TITLE: <input type="text"/>		5. NEXT HIGHER ASSEMBLY: <input type="text"/>			7. QUALITY ENGINEER: <input type="text"/>		
REQUESTER				PROJECT			
8. REQUESTER: <input type="text"/>	9. REQUESTER PHONE / EXT. <input type="text"/>		14. PO# <input type="text"/>		15. QUANTITY: <input type="text"/>	16. TYPE <input type="text"/>	
10. NEED DATE: <input type="text"/>	11. REQUESTER EMAIL: <input type="text"/>		17. IPT: <input type="text"/>			18. PROGRAM: <input type="text"/>	
12. CONTRACT NUMBER: <input type="text"/>	13. REASON FOR ECR <input type="text"/>		SCHEDULE IMPACT? <input type="checkbox"/> 19. NO <input type="checkbox"/> 20. YES 21. DATE: <input type="text"/>				
22. NATURE OF REQUEST COMPLETELY DEFINE THE ISSUE, INCLUDING SKETCH IF NECESSARY. SUGGEST A SOLUTION; GIVE A PRECISE REASON FOR THE REQUEST. <input type="text"/>							

Engineering Change Request Instructions

1. **DOCUMENT NUMBER** – Drawing number (Part Number)
2. **REV** – Revision of Document
3. **DASH** – Part number within Document number (i.e. -001, -003)
4. **DRAWING/DOCUMENT TITLE** – Drawing Title
5. **NEXT HIGHER ASSEMBLY** – Optional if known

PART INFO					
1. DOCUMENT NUMBER: <input type="text"/>	2. REV <input type="text"/>	3. DASH <input type="text"/>	3. DASH <input type="text"/>	3. DASH <input type="text"/>	3. DASH <input type="text"/>
4. DRAWING/DOCUMENT TITLE: <input type="text"/>		5. NEXT HIGHER ASSEMBLY: <input type="text"/>			

Engineering Change Request Instructions

6. **PROGRAM MANAGER** – Name of MEC Program Manager (Optional if known)

7. **QUALITY ENGINEER** – Name of MEC Quality Engineer (Optional if known)

■ **DATE:** Date of request

	DATE
6. PROGRAM MANAGER: <input type="text"/>	<input type="text"/>
7. QUALITY ENGINEER: <input type="text"/>	

Engineering Change Request Instructions

- 8. REQUESTER – Person filling out ECR
- 9. REQUESTER PHONE/EXT – Phone/Ext number of person filling out ECR
- 10. NEED DATE – Date needed by
- 11. REQUESTER EMAIL – Email of Requester
- 12. CONTRACT NUMBER – Not Applicable for Suppliers

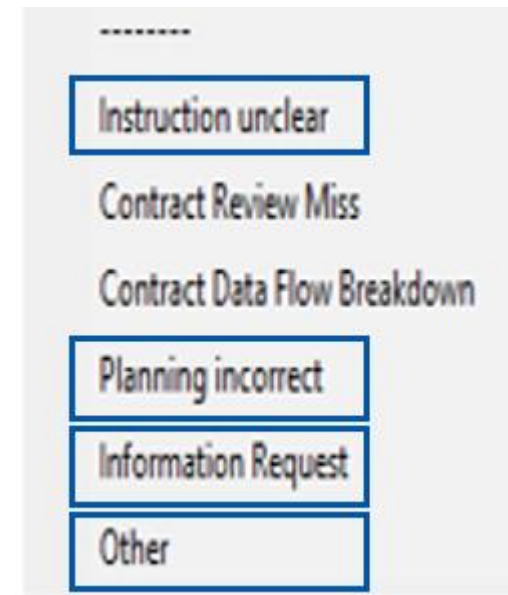
REQUESTER	
8. REQUESTER: <div></div>	9. REQUESTER PHONE / EXT. <div></div>
10. NEED DATE: <div></div>	11. REQUESTER EMAIL: <div></div>
12. CONTRACT NUMBER: <div></div>	13. REASON FOR ECR <div></div>

Engineering Change Request Instructions

13. REASONS FOR ECR drop down menu - option for Suppliers

- **Instructions Unclear:** The instructions provided on the purchase order text are not clear or not detailed enough.
- **Information Request:** Request for more information or clarification inclusive of, but not limited to drawing/model or specification interpretations.
 - Note: *This does not apply to questions related to the purchase order text.*
- **Planning incorrect:** The master routing instructions or purchase order text are not correct.

13. REASON FOR ECR

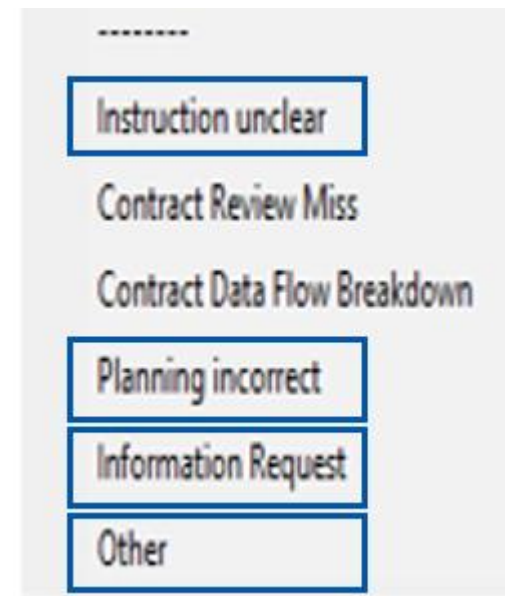


Engineering Change Request Instructions

13. REASONS FOR ECR drop down menu - option for Suppliers

- **Other:** Select this option if all of the reasons above do not apply
- **Suppliers typically submit an ECR for the following reasons:**
 - Need drawing clarification
 - Request for MEC drawings to be generated
 - Need specification clarification
 - Conflicting information on PO/Drawing/Specification
 - Request for deviation (alternative material size, type, final dimensions, alternate machining method)
 - Material issues
 - Dimension issues

13. REASON FOR ECR

Engineering Change Request Instructions

- 14. PO# – MEC Production Order Number or Purchase Order (PO#)
- 15. QUANTITY – Optional
- 16. TYPE – Drop down menu selection (see below)
- 17. IPT – Drop down menu selection (see below)
- 18. PROGRAM – MEC Production Order Number or Purchase Order (PO#)

- Bomb Rack
- M299 Modernizing
- Maintenance Refurbishment
- Complex Manufacturing
- Ground Vehicle Structures
- Joint Strike Fighter
- Launcher

PROJECT		
14. PO#	15. QUANTITY:	16. TYPE
<input type="text"/>	<input type="text"/>	<input type="text"/>
17. IPT:	18. PROGRAM:	
<input type="text"/>	<input type="text"/>	
SCHEDULE IMPACT?		
<input type="checkbox"/> 19. NO	<input type="checkbox"/> 20. YES	21. DATE: <input type="text"/>

- Process
- Design
- Tool
- Test
- NC Programming

Engineering Change Request Instructions

SCHEDULE IMPACT?

19. NO

20. YES

21. DATE - PO contractual delivery date

SCHEDULE IMPACT?

☐

19. NO

☐

20. YES


21. DATE:

Engineering Change Request Instructions

22. NATURE OF REQUEST

- Completely define the issue, including sketch if necessary. Suggest a solution, give a precise reason for the request. (Use 2nd page if need be)

22. NATURE OF REQUEST COMPLETELY DEFINE THE ISSUE, INCLUDING SKETCH IF NECESSARY. SUGGEST A SOLUTION; GIVE A PRECISE REASON FOR THE REQUEST.




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☐ CONTINUATION OF REQUEST ☐ CONTINUATION OF RESPONSE



Engineering Change Request Instructions

- Save and upload the completed ECR form to the “Uploads to Marvin Group folder” on the Marvin Group Portal
- Requester shall receive a copy of the ECR back with an assigned ECR #, noting that the ECR work flow has begun
- MEC engineering staff members are required to provide a response for management approval within two business days
 - An MEC engineer will reach out to requester for clarification of ECR if need be
- MEC engineering management will review and approve formal response within two business days
- Formal response is sent to the requestor through the Marvin Group Portal
 - If you do not receive a formal response through the portal within 5 business days of your initial request, please submit a request for status (include your ECR#) to: **DocumentControl@marvineng.com**