

CONSUMER PRODUCT SAFETY ACT
REPORTING
FORM E-6543

1. GENERAL

1.01 This Section outlines the specific procedures to be followed in Southwestern Bell to satisfy the requirements of the Consumer Product Safety Act (CPSA).

1.02 The Consumer Product Safety Act requires timely reporting concerning consumer products, including telephone accessories, which present a "substantial product hazard" (from chemical, acoustic, mechanical or electrical point of view). Consumer products are those products that the customer would normally be in contact with, and are generally located upon the customer's premise.

1.03 The Consumer Product Safety Act requires that prompt formal notification be made to the Consumer Product Safety Commission and corrective steps taken to schedule the removal of any potential risks of injury.

2. CONSUMER PRODUCT REPORT (CPR) E-6543

2.01 The Consumer Product Report (CPR), Form E-6543, will be used in Southwestern Bell for reporting all suspected violations of the Consumer Product Safety Act. A copy of the form is shown in Exhibit 1 and the instructions for completing the form are contained in Part 5 of this Section.

3. ITEMS MANUFACTURED BY OR PURCHASED THROUGH WESTERN ELECTRIC

3.01 The procedures to be used in forwarding a CPR, Form E-6543, covering products

manufactured by or purchased through Western Electric (including non-KS or AT spec items purchased through Western Electric) are provided in Exhibit 2.

3.02 Each Area Plant Supervisor shall be responsible for establishing the necessary field reporting procedures.

3.03 The Engineering Operations Manager - Maintenance shall be responsible for determining whether or not a General Trade item was purchased through Western Electric.

4. ITEMS PURCHASED DIRECT FROM A GENERAL TRADE MANUFACTURER

4.01 The procedures to be used in forwarding a CPR, Form E-6543, covering products purchased direct from a General Trade manufacturer are provided in Exhibits 3 and 4.

4.02 Each Area Plant Supervisor shall be responsible for establishing the necessary field reporting procedures.

4.03 The Engineering Operations Manager - Maintenance shall be responsible for determining if the item was purchased direct from a General Trade supplier. If the item was purchased direct, 5 copies of the CPR, Form E-6543, shall be forwarded to the Southwestern Bell General Trade Organization in the Engineering Director-Equipment and Buildings office.

4.04 The General Trade Organization shall determine whether the form will be processed under the procedures outlined in Exhibit 2 or 3.

5. PREPARATION OF FORM E-6543, CONSUMER PRODUCT REPORT (CPR)

5.01 Information Received (Exhibit 1, Part 1-24)

PART #

- 1 Check WECO QSM, if the unit was purchased through Western Electric. If purchased direct from the outside supplier, leave blank (will be completed by the General Trade Organization).
- 2 Enter Southwestern Bell.
- 3 The Engineering Operations Manager - Maintenance organization will assign the CPR# from a locally assigned series of numbers. These shall consist of the area name plus an assigned number. The first report shall be numbered #1 and each subsequent report will be numbered sequentially, i.e., Dallas #1, Dallas #2, etc.
- 4 The Engineering Department will also assign an Engineering complaint number to each CPR if complaint action is required.
- 5 Type or code of defective product and system in which used (Station, PBX, DATA, etc.).
- 6 Trouble condition encountered.
- 7 Quantity of product involved.
- 8 Length of service, if known or reasonable estimate.
- 9 Number, issue, figure and option of product drawing.
- 10 Number, issue, list of group of equipment drawing or number and list of KS or AT specification.
- 11 Name of serving Western Electric Company Service Center. (If purchased direct from the outside supplier, leave blank.)

PART #

- 12 Name of manufacturer. (IF Western Electric Company, show factory location.)
- 13 Check if product is new or class C stock, if known.
- 14 Customer's name, address and telephone number, if applicable.
- 15 Present location of defective product.
- 16 Furnish sufficient information to permit complete report. If space is not sufficient continue on blank sheets and staple to CPR.
- 17 If customer report, check if received by letter, telephone call, or orally.
- 18 Name, title and telephone number of employee initiating report or to whom the customer report was initially directed and date forwarded.
- 19 Name, title and telephone number of the supervisor of the person designated in #18.
- 20 Plant Staff comments regarding report.
- 21 Name and telephone number of Plant Staff representative and date.
- 22 Comments and disposition - Engineering Department.
- 23 Indicate if Legal Action pending.
- 24 Name and telephone number of person preparing report and date forwarded.

6. FINAL DISPOSITION OF CPR, FORM E-6543

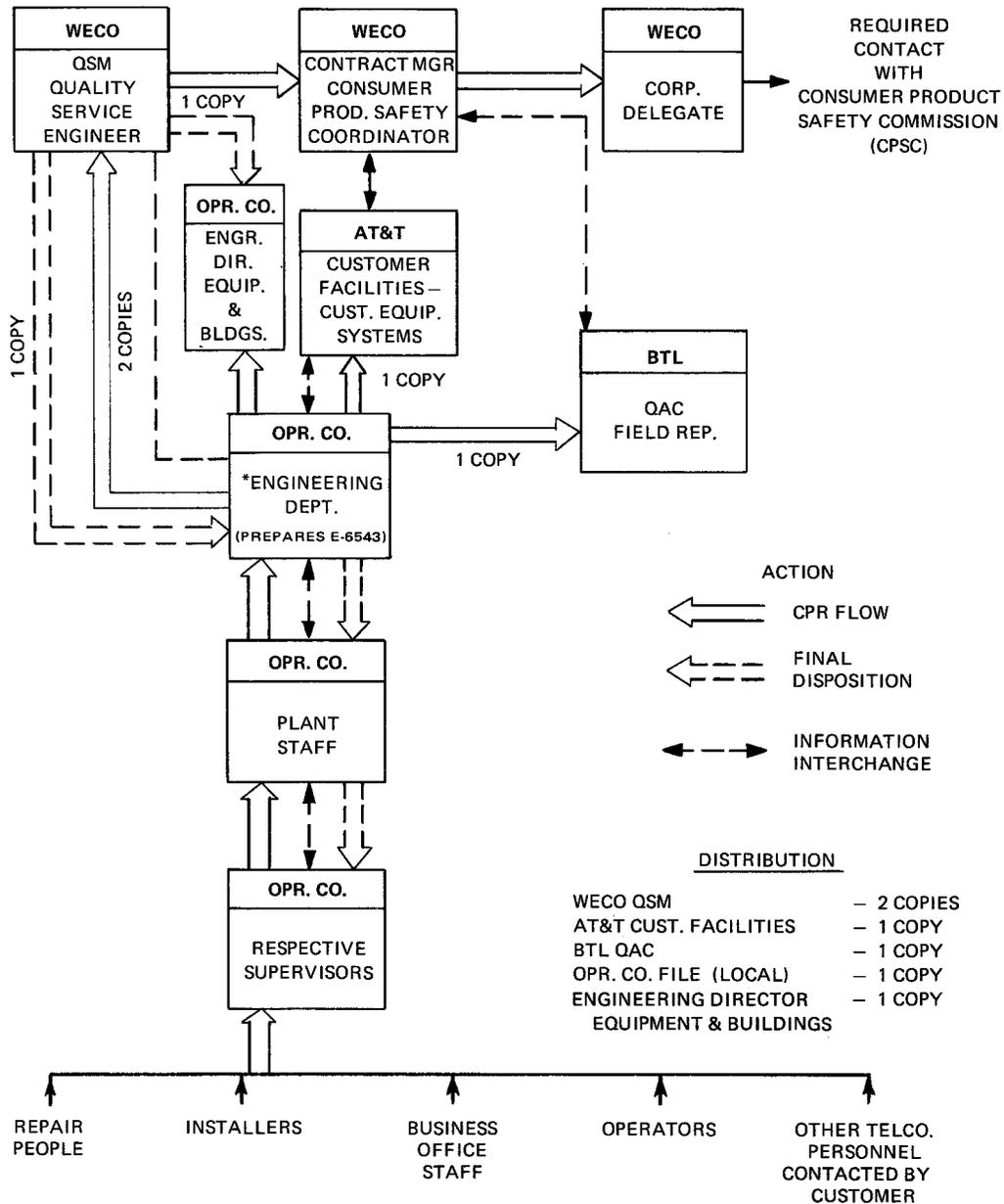
- 6.01 Final disposition of the Consumer Product Report, Form E-6543, shall be reported as shown in Exhibits 2 thru 4.
- 6.02 The Engineering Director - Equipment and Buildings or other appropriate headquarters' staff shall be responsible for notifying other affected Southwestern Bell operating areas of the status and final disposition of all CPR's.

EXHIBIT 1

CONSUMER PRODUCT REPORT (CPR) E-6543																						
TO: <input type="checkbox"/> WECO QSM - Quality Service Engineer <input type="checkbox"/> Bell System Purchased Products Division <input type="checkbox"/> Operating Co. Designee		1	Operating Co. CPR#			2	Engineering Complaint#		3	4												
DEFECTIVE PRODUCT - TYPE OR CODE					5	SYSTEM		5	QUANTITY DEFECTIVE	7												
TROUBLE CONDITION						6	TOTAL QTY INVOLVED			7												
LENGTH OF SRV	8	CKT DWG	9	ISS	9	FIG	9	OPT	9	EQPT DWG OR SPEC	10	ISS	10	LIST	10							
WECO DH OR GENERAL TRADE SUPPLY HOUSE LOCATION						11	NAME OR MFR (IF WECO, SHOW FAC LOC)			12	NEW	<input type="checkbox"/>	13	CLASS C	<input type="checkbox"/>							
CUSTOMER'S NAME			ADDRESS				TEL #			14												
LOCATION OF DEFECTIVE PRODUCT											15											
ORIGINATOR											NATURE OF REPORT											16
											CUSTOMER REPORTED BY: LETTER <input type="checkbox"/> TEL CALL <input type="checkbox"/> ORALLY <input type="checkbox"/> DATE											17
											<input type="checkbox"/> OBSERVED BY: _____ NAME TITLE TEL NO DATE FWD											18
											<input type="checkbox"/> CUSTOMER REPORTED TO: _____ SUPERVISOR											19
COMMENTS FROM PLANT STAFF											20											
NAME			TEL NO.				DATE FWD			21												
COMMENTS & DISPOSITION											22											
ENGINEERING											LEGAL ACTION PENDING YES NO											23
											LAW SUIT FILED AGAINST			AT&T		WECO			TEL CO			24
											NAME			TEL NO				DATE FWD				

EXHIBIT 2

WECO MANUFACTURED AND/OR SUPPLIED
CONSUMER PRODUCT REPORTING (CPR) FORM E-6543



*ENGINEERING DEPARTMENT, MAINTENANCE ENGINEERING GROUP

EXHIBIT 3

