



THE POWER OF CONNECTED

# Product / Process Change Notification (PCN) Honeywell Sensing and IOT (SIOT)

PCN #	HE1-005	Notification Date:	04/05/2019
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Title:	Symbolization change from Ink to laser printing
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**Honeywell Contact**

Name:	Consuelo Chavez	Title:	Sr. Quality Engineer
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E-mail:	Consuelo.chavez@honeywell.com	Date initiated:	04/05/2019
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**Product Identification**

Affected Part #(s)	2SS52M + 2SS52M-S
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Revision # (s)	A
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Does this change result in product number change?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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**Reason for Change: (check all that apply)**

Material	<input type="checkbox"/>	Processing / Manufacturing	<input checked="" type="checkbox"/>
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Design / Firmware / Software	<input type="checkbox"/>	Datasheet	<input type="checkbox"/>
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Logistics	<input type="checkbox"/>	Functional	<input type="checkbox"/>
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Appearance	<input checked="" type="checkbox"/>	Dimensional	<input type="checkbox"/>
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Quality / Reliability	<input type="checkbox"/>	Other:	<input type="checkbox"/>
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**Change Description (include detailed process steps as applicable)**

Documentation attached:	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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Actual process uses Ink to Symbolize Unit,  
New process will use Laser Marker System brand "Rofin"

**Justification for change**

Documentation attached:	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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Process improvement

**Quantifiable impact on Quality & Reliability (Include FMEA / reliability data as applicable)**

Documentation attached:	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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**Identification method to distinguish change**

By Date Code



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### Results Qualification Plan

Documentation attached:			YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Samples:	Available	<input checked="" type="checkbox"/>	Will be available:	<input type="checkbox"/>	Not Applicable	<input type="checkbox"/>
Sample availability date:		04/05/2019				
Samples available to request						

### Customer Acknowledgement & Disposition *(if applicable)*

Honeywell requests that you acknowledge receipt of this change notification. Please sign and e-mail to [SIOTQuality@Honeywell.com](mailto:SIOTQuality@Honeywell.com) and contact listed above.

Approved:	<input type="checkbox"/>
Rejected:	<input type="checkbox"/>
Reject Reason: <i>(if applicable)</i>	
Disposition Date:	
Company:	
Name:	
Title:	
Business Phone:	
Fax #	
E-mail:	
Location:	
Comments: <i>(if any)</i>	