

## Attachment E Coil Processor Product List

Please type or print. You may photocopy this page as necessary.

You have the option of applying for certification for the regional manufacturers/mobile roll-formers to whom you supply processed coil. To do so, please list each manufacturer and provide quality control plan information.

---

Regional manufacturer/mobile roll-former

---

Address

---

Contact name and title

---

Telephone number

---

E-mail address

---

Product name

### Quality control program

The Corporate Quality Manager has reviewed and signed the Reference Table for Quality Control Program Auditor

**OR**

The quality control program has been reviewed according to the requirements in Section IV.F.

---

Quality control evaluation service

---

Date of last approval of quality control plan

---

Regional manufacturer/mobile roll-former

---

Address

---

Contact name and title

---

Telephone number

---

E-mail address

---

Product name

### Quality control program

The Corporate Quality Manager has reviewed and signed the Reference Table for Quality Control Program Auditor

**OR**

The quality control program has been reviewed according to the requirements in Section IV.F.

---

Quality control evaluation service

---

Date of last approval of quality control plan

## Coil Processor Product List, continued

---

Regional manufacturer/mobile roll-former

---

Address

---

Contact name and title

---

Telephone number

---

E-mail address

---

Product name

### Quality control program

The Corporate Quality Manager has reviewed and signed the Reference Table for Quality Control Program  
Auditor

**OR**

The quality control program has been reviewed according to the requirements in Section IV.F.

---

Quality control evaluation service

---

Date of last approval of quality control plan

---

Regional manufacturer/mobile roll-former

---

Address

---

Contact name and title

---

Telephone number

---

E-mail address

---

Product name

### Quality control program

The Corporate Quality Manager has reviewed and signed the Reference Table for Quality Control Program  
Auditor

**OR**

The quality control program has been reviewed according to the requirements in Section IV.F.

---

Quality control evaluation service

---

Date of last approval of quality control plan