

supplier self-evaluation questionnaire

Please complete this questionnaire and return to sender by fax or e-mail.

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Purchase
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1. company data

1.1 contact details

company name: _____
street: _____
zip code: _____ city: _____
federal state: _____
country: _____
telephone: _____
e-mail: _____
homepage: _____

1.2 general data

headquarters: _____
(Please list!)

group affiliation: _____
(Please list!)

subsidiary: _____
(Please list!)

1.2 general data

location germany: _____
 (Please list!)

location europe: _____
 (Please list!)

substitute: _____
 (Please list!)

year of foundation: _____

number of employees: _____

VAT No: _____

1.3 contact person

Board of Management	
name: Mr/ Ms	
telephone:	fax:
mail:	

sales management	
name: Mr/ Ms	
telephone:	fax:
mail:	

contact person sales // product range:	
name: Mr/ Ms	
telephone:	fax:
mail:	

1.3 contact person

contact person sales // product range:	
name: Mr/ Ms	
telephone:	fax:
mail:	

contact person sales // product range:	
name: Mr/ Ms	
telephone:	fax:
mail:	

research & development	
name: Mr/ Ms	
telephone:	fax:
mail:	

plant management	
name: Mr/ Ms	
telephone:	fax:
mail:	

production management	
name: Mr/ Ms	
telephone:	fax:
mail:	

quality management	
name: Mr/ Ms	
telephone:	fax:
mail:	

1.3 contact person

claim processing	
name: Mr/ Ms	
telephone:	fax:
mail:	

logistics department	
name: Mr/ Ms	
telephone:	fax:
mail:	

purchase department	
name: Mr/ Ms	
telephone:	fax:
mail:	

2. financial

2.1 financial data

bank account: _____

financial institute: _____

account number: _____

bank code: _____

IBAN: _____

SWIFT-BIC: _____

2.2 Development of turnover in last 3 years:

year	turnover

2. financial

2.3 Does existing a product liability insurance?

yes/ amount: _____ € no

3. production- and delivery program

3.1 Has your company an own research and development department?

yes no

3.2 Which of the following products are in your portfolio?

- | | |
|--|---|
| <input type="checkbox"/> armin hardener | <input type="checkbox"/> preservative |
| <input type="checkbox"/> accelerator | <input type="checkbox"/> corrosion inhibitor |
| <input type="checkbox"/> polymer emulsion | <input type="checkbox"/> redispersible powder |
| <input type="checkbox"/> defoamer | <input type="checkbox"/> conductivity |
| <input type="checkbox"/> epoxy resins | <input type="checkbox"/> solvent |
| <input type="checkbox"/> coloured quartz | <input type="checkbox"/> dispersing agents |
| <input type="checkbox"/> fibers | <input type="checkbox"/> oil/ fet/ wax |
| <input type="checkbox"/> fillers | <input type="checkbox"/> pigments/ colouring |
| <input type="checkbox"/> retarder | <input type="checkbox"/> polyole |
| <input type="checkbox"/> isocyanates | <input type="checkbox"/> reactive diluent |
| <input type="checkbox"/> office equipment | <input type="checkbox"/> shrinkage convensation |
| <input type="checkbox"/> packaging | <input type="checkbox"/> thickener |
| <input type="checkbox"/> communication | <input type="checkbox"/> hydrophobic agent |
| <input type="checkbox"/> tools & other working materials | <input type="checkbox"/> cement/ lime/ gypsum |
| <input type="checkbox"/> personal protection equipment | |
| <input type="checkbox"/> others: (e.g. raw- & working materials, advertising, promotion article) | |
-
-

3.3 Your products quality to our portfolio:

- waterproofing an restoration
- tile/ natural stone/ screed installation
- road and track construction
- concrete restoration
- hydraulic structures
- surface protection systems
- concrete technology

3.4 Which products do you feel competitive with?

3.5 Which are your customer references?

4. management

4.1 quality management

4.1.1 Does your company accept audits made by customers?

- yes no

4.1.2 Would you agree to signing a secrecy agreement with us?

- yes no

4.1.3 Is a corporate quality management agreement of interest for you?

- yes no

4.1 quality management

4.1.4 Has your company a certified quality management?

yes / which? _____ no

If you answer is yes, please enclose the certificate!

4.1.5 If you answer is no, do you plan a certification?

yes no

4.1.6 Which certification do you want to realise in the future?

appointed date: _____

4.1.7 Is there any quality guide, where processes of system and operating procedures are described?

yes no

4.1.8 Are incoming goods subject to an immediate control?

yes no

4.1.9 Is a valid control plan available for each product?

yes no

4.1.10 Are measuring and inspection equipment subject to regular tests in accordance fixed intervals?

yes no

4.1.11 Are machines and equipment subject to preventive maintenance measures?

yes no

4.1 quality management

4.1.12 Are damaged parts especially marked and stored separately to avoid confusions?

yes no

4.2 industrial safety and environmental management

4.2.1 Has your company industrial safety system?

yes / which? _____ no

If you answer is yes, please enclose the certificate!

4.2.2 If you answer is no, do you plan to launch an industrial safety system?

yes no

4.2.3 Which industrial safety system do you plan to launch?

appointed date: _____

4.2.4 Has your company an enviromental system?

yes / which? _____ no

If you answer is yes, please enclose the certificate!

4.2.5 If you answer is no, do you plan to launch an enviromental system?

yes no

4.2.6 Which enviromental system do you plan to launch?

appointed date: _____

5. delivery & logistics

5.1 How quickly can you react to changes in orders and quantities?

within one day

within 2-3 days

within one working week

after one working week

5.2 Are you using returnable packages or other environmentally friendly packages when you supply your customers with goods?

yes

no

If you need any further information, please let us know.

You are our contact person, if we have any further queries regarding your company data:

_____ tel.-no.: _____

Please inform us in case your contact details change.

date

signature

Thank you for your efforts!