

## **Supplier Questionnaire**

MEK\_SupplierQuestionnaire

If you are interested in becoming a MOTORTECH business partner, we would like to invite you to fill out our supplier questionnaire.

This document will help us to align your product portfolio and services with our company needs giving both sides the opportunity to establish an efficient and successful business partnership in the future.

The questionnaire comprises following information:

- General information about your company
- Detailed information about your product portfolio and production processes
- Company certificates

"We thank you for your interest and look forward to learning more about your company!"

General info	rmation												
Company name:						Co	Contact person:						
Premises add (street name		er):											
Premises add (city, state zi													
Telephone:						Fa	Fax:						
Website:						E-	E-mail:						
Company pro	ofile												
Legal form:						Fo	Founding year:						
Annual Turno	over:												
Subsidiaries	(if any):												
Group affiliat	tion (if any)	):											
Tax identification number:						Sa	Sales Tax identification number:						
Please descr business act		ain											
Are you:													
Distributo	untries ar	e the com	panies										
operating yo	u represen	t?											
What kind of do you repre	products a sent?	ınd industr	ies										
Producer													
Production Site (if any):											Shifts per day:		
Which indust	tries do voi	ı serve?											
willen muusi	uics uv yvi	a SCIVE:											
Erstellt:	NW	Datum:	30.06.2015	Geändert:		Datum:	:		Gepr./Freigegeben:		Datum:		



## Supplier Questionnaire

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Number of empl	oyees											
Total: Administration: E				Engin	gineering: Production:							
		l Li										
Management												
Owner of CEO:	Telephone:											
	E-mail addres	s:		Languages:								
Quality Representative:	Name:			Telephone:								
·	E-mail addres	s:		Languages								
Technical Reprentative:	Name:			Telephone	:							
	E-mail addres	is:		Languages	:							
Commercial Representative	Name:			Telephone	:							
	E-mail addres	s:		Languages	:							
Reference												
Please list your to	p 3 customers:											
1.	Country:											
2.	Country:											
3.					Country:							
Product range a	nd production	n proces	ses									
Please select the	type of product	you prov	ide:									
Standard pa	☐ Electronics ☐ Construction					ction parts						
Please give a brie	ef description of	f the type	s of products and services you	provide:								
Do you perform ar				☐ Ye	es	☐ No						
If yes, please spe	ecify											
Which was durat	n nrocesse	d c '	r ara available?									
Which production	ii processes and	u support	. are available:									
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## Supplier Questionnaire

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Do you have the capability to design and build in-	house?				Yes	☐ No
Tools to be used in the production of a product					Yes	No
Gauges/ Fixtures					Yes	No
Prototype capabilities		Yes	□ No			
If yes, please specify:						
Explain characteristic properties/ limitations of t	he products manufact	tured (e.g. we	eight, size, materia	al etc.)		
Certification						
Is your company approved to ISO 9001?					Yes	☐ No
If yes:						
Version:	Registration Numb	er:		Validity perio	d:	
If no, how do you assure your quality standard currently?						
Other certifications:						
Certificate:			issued:		validity:	
Certificate:			issued:		validity:	
Certificate:	issued:				validity:	
Please define your quality management for initia	l samples and serial p	production:				
Product liability						
To what amount is the company insured against li	ability claims?					
Maximum amount:	Subsequent dama	ges:		Recall costs:		
Logistics						
Which logistic principles do you use?						
"First in First Out" principle					Yes	☐ No
Kanban Principle					Yes	☐ No
Consignment Stock					Yes	☐ No
Erstellt: NW Datum: 30.06.2015	Geändert:	Datum:	Gepr	./Freigegeben:	Datum:	