

Supplier questionnaire



Document authors: Wolfgang Pernsteiner, Ralph Zohner

EK_02 Supplier questionnaire

Questions about the company	Supplier:			
	Company name (incl. legal form):			
	Plant:			
	Address:			
	Tel.:		Fax:	
	Website:		Email:	
	Employees:	Total:	in manufacturing/production: in assembly:	in administration: - of which in planning:
	Employees worldwide:			
	Total sales in last four years:			
	Distribution of sales among business areas:	Business area	Sales 20__ (€)	Sales 20__ (€)
		1.		
		2.		
		3.		
	4.			
	Which industry sectors are supplied?			
	What proportion of your sales (in %) is achieved in the construction industry?			
	Products or services that you (wish to) supply to us:			
Supply volume (in €):	Year:			
Upstream suppliers:				
Composition of the selling price (in %):	Energy: Staff:	Raw materials / semi-finished products:		
Contact person: - Management: - Sales: - Production: - Quality Officer:				

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	References: (can also be attached as an annex)			
	History (development history, compensations, bankruptcies, etc.)			
Questions about the head office	Company name of head office:			
	Address:			
	Tel.:		Fax:	
	Website:		Email:	
	Total sales:		Year:	
	Number of plants and locations:			
	Manufacturing/production:	<input type="radio"/> in Austria <input type="radio"/> abroad, where:		
	Export proportion (in %):	Main export country:		
	Holdings in:			
	Holdings of:			
Only for plant builders	Corporate area:	<input type="radio"/> Assembly company <input type="radio"/> Services <input type="radio"/> Construction company <input type="radio"/> Other		
	Planning:	<input type="radio"/> Own <input type="radio"/> Third party		
	Planning quality CAD:	<input type="radio"/> Yes <input type="radio"/> No, system:		
	Member of an umbrella company:	<input type="radio"/> Yes <input type="radio"/> No		
	If yes, which:			

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Questions about quality management	Does your company have a documented quality management (QM) system? <input type="radio"/> Yes <input type="radio"/> No
	Is the QM system certified? <input type="radio"/> Yes <input type="radio"/> No If yes, (in this case the answering of the other questions may not be needed)
	<ul style="list-style-type: none"> - Pursuant to which standard: - Since when? - Until when? - By which agency? - Please include a copy of the certificate. - If required, would you be able to send us a copy of the handbook? <input type="radio"/> Yes <input type="radio"/> No - Are all products, services and corporate sites covered by the certification? <input type="radio"/> Yes <input type="radio"/> No If no, which are covered?:
	In the foreseeable future, are you planning the introduction and certification of a QM system? <input type="radio"/> Yes <input type="radio"/> No If yes,
<ul style="list-style-type: none"> - Pursuant to which standard? - When? - By which agency? 	
Do you consent to us obtaining an understanding of your QM system by means of:	
<ul style="list-style-type: none"> - An inspection <input type="radio"/> Yes <input type="radio"/> No - An audit <input type="radio"/> Yes <input type="radio"/> No 	

Place and date: _____

Authorised signature

Authorized signature of the QM Officer

Name in block capitals

Name in block capitals