

Supplier self-assessment sheet

Please fill in and return online info@pacoma.com

1. General information of the company

1.1. Address

Name _____

Street _____

Zip-code _____ City _____

Country _____

Phone No. _____ Fax No. _____

E-Mail _____ URL _____

1.2. Contact persons

General Manager

Name _____ Phone No. _____

E-Mail _____ Fax No. _____

Sales – strategic

Name _____ Phone No. _____

E-Mail _____ Fax No. _____

Sales – dispositive

Name _____ Phone No. _____

E-Mail _____ Fax No. _____

Engineering

Name _____ Phone No. _____

E-Mail _____ Fax No. _____

Quality

Name _____ Phone No. _____

E-Mail _____ Fax No. _____

1.3. Product range (please send us brochures etc.)

Product type(s)	Manufacturer	Dealer
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

1.4. Number of employees

Employees _____

Workers _____

Quality assurance _____

1.5. Totale sale

1 year previous _____
EUR Pacoma portion (%)

2 years previous _____
EUR Pacoma portion (%)

1.6. Valid order/accounting address

1.7. Further locations (zip-code/city/contact person/phone No./E-Mail)

Location 1 _____

Location 2 _____

Location 3 _____

1.8. List of main customers (A-Customers)

Name	Share of turn over (%)
Name	Share of turn over (%)
Name	Share of turn over (%)
Name	Share of turn over (%)
Name	Share of turn over (%)

1.9. Trades

2. Statements on Quality Assurance

2.1. Is your quality system certified? (according to DIN/EN/ISO) Yes No

2.1.1. In case of yes, which certification?

2.2. Did other companies carry out successful audits? Yes No

2.2.1. In case of yes, who did carry out the audit?

2.3. Do you have a quality manual of your company? Yes No

2.4. If no quality manual is available, are there any other descriptions of your quality system? Yes No

2.5. Do you work with quality plans? Yes No

2.6. Do you work with initial sample reports? Yes No

- 2.7. Do you regularly carry out checks on incoming goods? Yes No
- 2.8. Are regular production controls installed? Yes No
- 2.9. Are systematic final inspections before dispatch carried out? Yes No
- 2.10. Are production facilities and gauges regularly controlled? Yes No
- 2.11. Do you record costs related to quality? Yes No
- 2.12. Do you have a product liability policy? Yes No
- 2.12.1. In case of yes, which amount?
-
- 2.13. Shall quality records be maintained to demonstrate achievement of the required quality? Yes No
- 2.14. Can you ensure the traceability of deliveries from your supplier? Yes No partly
- 2.15. Do you effect deliveries by your own vehicles? Yes No partly
- 2.16. Do you have a ,Code of Conduct‘? Yes No

Stamp

Date

Signature