

Supplier Questionnaire

Company name	Date
1. General Information	
Company address	
Contact	
Function	
Phone	
Fax	
Mobile	
Email	
Homepage	
2. Company Profile	
Group affiliation	
Founding year	
Short history	
Form of organization	
Headquarters	
other locations	
Chief executive officer	
Key account manager	
Technical manager	
Head of quality management	
Contact sales department	
Email for orders (non-personal)	
Bank details Institute Account No. IBAN BIC	
Tax ID	
Trade ID	

Supplier Questionnaire

3 Products / manufacturing capabilities / services	
Product line / services	
Which manufacturing capabilities do you have?	
Is it possible to manufacture according to technical drawings?	
Usable materials	
Internal or external tool engineering?	
Which CAD programs are used?	
Is there a CAD data connection and if there is which type?	
Core competence of the company?	
Do you plan to buy functional or quality-relevant parts from a sub-supplier?	
Which methods of development and quality are used (e.g. FMEA etc.)	
Which testing facilities are used? With which testing auditing institutions do you cooperate?	

Supplier Questionnaire

4. Corporate Data							
	Last year		Current year			Next year (planning)	
No of employees							
Currently (in %)	Production		R&D		QA/QM		Other
Total turnover (in EUR)							
Currently (in %)	Home country%		Europe %		Overseas%		

References rolling stock

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5 Quality		
Certificates	Certification date	Certification company

6. Investments: last / current / next year

Thank you for the information. We look forward to a good and long-term cooperation!

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