HUMMEL AG

Lise-Meitner-Str.2 D-79211 Denzlingen

Phone: ++49/(0)7666-91110-0 Fax: ++49/(0)7666-91110-20



Suppliers Questionnaire

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Part I: name and address:					Occurrent in the little control of the control of t			
Supplier:				Corrections (if necessary)				
Address:								
Phone:								
Fax:								
.								
Our No. with you								
Part II: more information's regarding your company								
Company status Ltd,	When establ		Branch nerc. Industrial	1-24	Company 25-49 50-249			
Product spectrum								
Product catalogu	e enclosed:	yes:	no: 🗌	sepa	arately by pos	st: 🗌		
Part III: respor	nsibilities							
•	Name		Pho	ne	Fax			
Management								
Works								
Sales Manager								
Quality Manag.								
Bookkeeping								
Engineering								

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Teil IV: questions about your QS-System

1	Do you work to extern certified	Yes	Certified according to?	No		
	QM-System ?					
	If the answer to the above question is Y and go to section 5.1	se a co	opy of your certificate			
			Yes	Name of system	No	
2	Do you work with another QM-System?					
2.1	If yes, do you regularly audit your syste					
2.2	Were you audited by a third party?					
3	Is your measuring equipment regularly					
			Yes	What kind?	No	
4	Is there a work in progress inspection?					
5	Is there a final inspection?					
5.1	If yes, are these documented?					
5.2	Are these documents included with goo					
			Yes	Certification planned until?	No	
6	Are further M-Systems implemented?					
		OHSAS 18001				
7	Are you prepared to conclude a QAA					
8	Are your products conform to:	REACH				
	(please enclose confirmation)	RoHS				
9	Stamp and signature					
Date Name			Stamp and signature			
(followi	ng passage is to be filled by HUMMEL AG)					
Supplier will be)		
Head of	Supply Chain Management, date, signature	Head of Qua	Head of Quality Management, date, signature			