# **Details about your company**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company name/corporate form:** |  | | | |
| street:  postal code / city: |  | |  | |
|  | |  | |
| value added tax identification number: |  | | | |
| bank details (bank code, account No, bank): |  | | | |
| phone: |  | - | |  |
| telefax: |  | - | |  |
| e-mail: |  | @ | |  |
| internet address: |  | | | |
| number of employees: |  | | | |
| turnover of prior year: |  | | | |
| founding year: |  | | | |
| group affiliation: |  | | | |
| affiliated companies: |  | | | |
| production sites: |  | | | |
| shares in other companies:  (for example joint venture) |  | | | |
| Which product groups / services do you offer: |  | | | |
| Who are your most important customers: |  | | | |
| Who are your most important suppliers: |  | | | |
| Your terms of delivery: |  | | | |
| Your terms of payment: |  | | | |
| Please name a contact person (name, telephone, email) in: |  | | | |
| business management: |  | | | |
| technical management: |  | | | |
| commercial management: |  | | | |
| purchase department: |  | | | |
| production management: |  | | | |
| quality assurance: |  | | | |
| environmental protection: |  | | | |

|  |  |
| --- | --- |
| health and safety at work: |  |
| development: |  |
| sales: |  |
| field service: |  |

# **Details on Qulity ASSurance in your company**

1. **Basic quality  
   The Krah group demands and assesses the following basic requirements**:

failure rate 0%  
delivery reliability 100%  
quantity reliability 100%

Can you fulfil these requirements and how do you realize them?

1. **Procurement process**According to which directives / criteria does the qualifying of your suppliers take place (audits, training modules, self-developed quality programmes or certificates)?

**2.1 Traceability**

Can your system ensure traceability across the entire supply chain and production chain via a documented process? yes  no

If no, up to which point in the supply chain is this ensured?

1. **Product liability**To what amount is your company insured against liability demands:

|  |  |  |
| --- | --- | --- |
| maximum coverage |  | € |
| consequential damages |  | € |
| recall methods |  | € |

**Business liability insurance**

What is your limit of indemnity? €

**Please enclose the corresponding certificate copy of the insurance company!**

**3.1. Guarantee**

We demand, additionally to the legal period of guarantee, a promise of guarantee (guarantee agreement) of 48 months from the installation of the product on the site of the Krah-group’s customer.

Please confirm the guarantee period:

**3.2 Spare parts procurement**

After expiry of the series production article, we expect our customer to keep up the complete spare parts procurement to our company for at least 10 years.

Please con firm: \_\_\_\_\_\_\_\_\_\_

**3.3 Access to IMDS-database** (international material data system) existing: yes  no

**3.4 RoHS/REACH**

**We confirm, that we comply with relevant, current and valid regulations of the**

**European Parliaments**

3.4.1 RoHS (Restriction of certain Hazardous Substances) yes  no

3.4.2 REACH (EC Regulation on Chemicals) yes  no

**3.5 Safety/Emergency plan**

3.5.1 Has your company compiled safety plans for in-house manufacturing and for key suppliers or do such plans exist? yes  no

3.5.2 Are events resulting from force majeure declarations and (acts of God) such as: War, riots, explosions, fire, lightning strikes, floods, earthquakes, typhoons, epidemics,

Labour disputes, acts or omissions by the authorities or shortages of raw materials or energy taken into account? yes  no

3.5.3 Would you provide us with your safety and emergency plans if requested to do so?

yes  no

1. **QM system**

**4.1 Is your company IATF 16949-certified?** yes  no

If yes, please provide us with a copy of the certificate

If no: When are you planning to obtain IATF 16949 certification? Date: \_\_\_\_\_\_\_\_\_\_

Are you prepared, where applicable with our help, to carry out further development as per

IATF 16949 and to be certified at the end of the process? yes  no

Do you have other certification, such as ISO 9001? yes  no

If yes: Please provide a copy of the certificate

**4.2 If you do not have any certification, please answer the following questions:**

4.2.1 Will incoming inquiries /drawings and orders be checked yes  no

with regard to feasibility (technology, time schedule, price)?

4.2.2 Do you make sure, that schedule and price deviations yes  no

will be announced to us in written form in time?

4.2.3 Do you make sure, that the production always uses the valid yes  no

specification resp. drawing?

4.2.4 Will you inform us about changes concerning catalogue goods yes  no

or product announcements in time? Do you offer alternatives to us?

4.2.5 Do you carry out a final inspection? yes  no

* + 1. Which quality proofs do you place at our disposal?

4.2.7 Do you regularly check inspection devices? yes  no

4.2.8 Do you make sure, that a protecting article packaging respectively yes  no

outer packaging will be used?

4.2.9 Do you make sure that the prescribed kind of dispatch will be applied? yes no

4.2.10 Do you make sure, that parts, which do not correspond to the specifications, will be signed   
 and not mixed up or confused with o.k. parts ? yes  no

**4.3 What is the present quality situation in your company?**

|  |  |  |
| --- | --- | --- |
|  | present year | previous year |
| ppm rate |  |  |
| number of complaints |  |  |

**4.4 Which quality aims does your company have?**

|  |  |  |
| --- | --- | --- |
|  | present year | previous year |
| ppm rate |  |  |
| number of complaints |  |  |

**5 Environment**

**Have you implemented an environmental management system?** yes  no

If yes, which environmental management standard is it based on: DIN EN ISO 14001, Other.......

If the environmental management system is validated or certified, do you have a valid

environmental declaration or certificate? Please include a copy

**If no, please answer the following questions:**

**5.1 Do you plan to obtain DIN EN ISO 14001 certification?** yes  no

If yes, when? Date:\_\_\_\_\_\_\_\_\_\_\_

**5.2 Have you defined aims for the amelioration or environment protection within your   
company?  
What are your aims? What is the degree of fulfilment?  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**5.3 How do you make sure, that work is done according to legal prescriptions?  
What proofs do you have?  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Occupational safety** 
   1. **Have you installed an occupational health and safety system, for example according to OHSAS 18001 or an alternative system?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

You hereby confirm your preceding details:

date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_