|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Company:** | |  | |  | **Phone:** | |  | | | | |
| **Street:** | |  | |  | **e – mail:** | |  | | | | |
| **City:** | |  | |  | **Internet:** | |  | | | | |
| **Country:** | |  | |  | **Fax-No:** | |  | | | | |
| **Tax-No:** | |  | |  |  | |  | | | | |
| **Bank account:** | |  | |  |  | |  | | | | |
| **Member of company group:** | |  | |  |  | |  | | | | |
| **Main contact:** | |  | |  | **e – mail:** | |  | | | | |
| **Position:** | |  | |  | **Phone:** | |  | | | | |
| **Production plant(s):** | |  | |  | **Internet:** | |  | | | | |
| **Street:** | |  | |  | **e – mail:** | |  | | | | |
| **City:** | |  | |  | **Phone:** | |  | | | | |
| **Do you have product liability insurance ?**  **For what geographical areas**  **Amount of cover:**  **Please add copies**  **Do you use subcontractors for our product?**  If yes, for which product?  **Production plant(s):** | | ❑ yes ❑ no  PL D EU worldwide  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ❑ yes ❑ no  **Producer**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Each producer has to fill in the supplier questionnaire!** | |  |  | | In case of no existing current liability  insurance on the supplier side business with FRoSTA cannot be transacted  **Product/ product group**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **1. Person responsible for** | | Purchasing: |  |  | | | | | | | |
|  | | Product Development: |  |  | | | | | | | |
|  | | Quality assurance: |  |  | | | | | | | |
|  | | Person in charge to sign the contracts |  |  | | | | | | | |
|  | | E-mail address to send the orders: |  |  | | | | | | | |
|  | | Crisis manager, product recall: (phone available 7 days/24 h) |  |  | | | | | | | |
|  | | | | | |  | |  | | | |  | | Production / Produktentwicklung / Rozwój produktu: |  |
|  | | | | | | |  | |  | |  | |
|  | | | | | | | | |
| **Main product groups** | **Quantity (t/a)** | | | | |
|  |  | | | | |
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# Licenses and certificates

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| --- |
| Does the factory comply with a standard (e.g. EC license) ❑ yes ❑ no  If “Yes” – please name them: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have a BRC certificate? ❑ yes ❑ no  If yes, please add copy  Do you have an IFS certificate? ❑ yes ❑ no  If yes, please add copy  Do you have a FSSC 22000 certificate? ❑ yes ❑ no  If yes, please add copy When there is no BRC or IFS or FSSC 22000 standard – when do you plan to make this certificates?  |  |  | | --- | --- | | IFS |  | | BRC |  | | FSSC 22000 |  |   Are you certified according to a social standard (e.g. SA8000) ? ❑ yes ❑ no  If “Yes” – please name them and add copies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Do you have SMETA audit? ❑ yes ❑ no  Please give your SEDEX number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please link with us on SEDEX: ZC1046945  Are you certified according to ISO 14001? ❑ yes ❑ no  If yes, please add copy  Are you certified according to ISO 50001? ❑ yes ❑ no  If yes, please add copy  Other certificates? (e.g. ISO 22000, ISO 9001, HACCP, MSC, organic, RSPO etc.)? |
| **Please add copies**   |  |  |  | | --- | --- | --- | | **License / Certificate** | **Level** | **Since** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |
|  |

Please provide references about your other high profile customers:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Important – for below question please give answers referring to products delivered/which are going to FRoSTA or analogic**  **Detection** – do You have:  ❑ X-Ray ❑ Metal Detector ❑ Laser Sorter ❑ Other (please name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | | |  |
|  | |
| Audits Are you willing to give our staff or company representing us access to your factory to perform audit (also unannounced) at your premises and allow to check all product relevant documents? | |
| ❑ Yes ❑ No |  | | |  | | |  |
| **4. Code of Conduct**  The Supplier shall ensure the observance of ethical standards - Code of Conduct for FRoSTA Suppliers - according to Appendix unreservedly. | |
| The signature is a guarantee that all information given in the questionnaire are true and actual. Supplier is obliged to inform FRoSTA about any changes and send verified questionnaire min once per 3 years. |  | |

Place, date Readable signature and company stamp