

**SUPPLIER QUESTIONNAIRE**

DOC: CQF-012

REV: 5

**General Information**

<b>Company Name:</b>			
<b>Street Address:</b>		<b>City:</b>	
<b>State:</b>		<b>Zip Code:</b>	
<b>Phone No:</b>		<b>Website:</b>	
<b>Type of Product or Service provided:</b>			

**Contact Information**

	<b>Name</b>	<b>Title</b>	<b>Phone No.</b>	<b>Email</b>
<b>Quality</b>				
<b>Sales</b>				
<b>Production</b>				
<b>Safety</b>				
<b>Health</b>				



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## Section 1

<b>Environmental Health &amp; Safety Management</b>	<b>Third Party Certification</b>					
		ISO14001		ISO45001		Other
	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>

- If yes to any of the above, please provide a copy of the certificate.
- If your company is not registered, do you have a documented Environmental Health and Safety system? Yes  No
- Provide your company's injury/illness experience for the past 3 years as reported on the OSHA 300 log.

INJURY/ILLNESS HISTORY		
<i>Metric Type</i>	<i>Metric</i>	<i>Comment</i>
Number of OSHA Recordable Cases		
Number of Lost/Restricted Workday Cases		
Number of Fatalities		
Number of Man-Hours Worked		

- Does your company have an environmental health & safety policy? Yes  No
- Has your company been cited by OSHA/EPA in the past 3 years? Yes  No
- During the last five (5) years, has your company/firm received a violation/fine/penalty for non-compliance involving any of the following:
  - Discharging oil, an oil byproduct, or other hazardous substances to land, water, or air Yes  No
  - Release of oil or hazardous waste during transport of hazardous materials and/or waste Yes  No
  - Improper disposal/dumping of hazardous waste or hazardous materials on land or in water Yes  No

[ If you answered YES to any of the questions above, please provide an explanation of the circumstances surrounding the violation here



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## Section 2

Quality Management	Third Party Certification			
	ISO9001	AS9100	IATF16949	Other
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	

- If yes to any of the above, please provide a copy of the certificate and skip questions below then complete section 4.
- If *not* registered and have a documented quality system, provide a copy of the Quality Systems Manual and complete questions below and section 4.
- If your company is *not* registered and *does not* have a documented quality system, complete questions below and section 4.

Questions	Response	Comments
Quality reports directly to top level management.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Quality management system effectiveness is regularly checked (ex. internal audits).	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Quality management system audits are documented.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
All supplied quality-relevant materials are subjected to receiving inspection.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
There are written inspection/test instructions for receiving inspection.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Receiving inspection/test instructions are available and followed.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Results of receiving inspection are documented.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Production processes are fixed in writing.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Material (supplied parts, unmachined parts, finished parts etc.) are clearly identified.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Defective parts are clearly identified to be "defective parts".	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Finished parts can be traced back.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
All manufactured product is subjected to a systematic test or inspection (Note: also applies when the customer does not require any test or inspection).	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
There are written inspection /test instructions for the in-process and/or final product.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Inspection/test instructions are available where needed.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Inspection/Test results are documented.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Certificates of conformance are issued in accordance with thyssenkrupp rothe erde USA Inc. Terms and Conditions.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Customers are informed about deviations from finished product requirements.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Supplier guarantees nonconforming products are not forwarded to the	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	



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customer.			
Process for control of nonconforming product is documented.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Employees understand the process for controlling nonconforming product.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Measuring and testing equipment is systematically controlled	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## Section 3

Laboratories and Service Providers	Third Party Accreditation			
	A2LA	ISO17025	Customer	Other
Yes	<input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
No	<input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
N/A	<input type="checkbox"/>	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>

- If yes to any of the above, please provide a copy of the certificate.

## Section 4

**By submission of this form you agree to the following requirements for approved Vendors:**

1. thyssenkrupp rothe erde USA Inc. requires 100% on time delivery performance from vendors. Purchase Orders will provide appropriate planning information and purchase commitments to enable vendors to meet this expectation.
2. thyssenkrupp rothe erde USA Inc. and their customers reserve the right to verify purchased product at the vendor's premises when contractually required. Arrangements will be provided on Purchase Orders if applicable.
3. thyssenkrupp rothe erde USA Inc.'s terms and conditions (located on thyssenkrupp rothe erde USA Inc.'s Website <http://www.rottek-inc.com/> in the Download Section).
4. Records are established and maintained to provide evidence of conformity to thyssenkrupp rothe erde USA Inc. requirements and of the effective operation of the quality management system. Records shall remain legible, readily identifiable and retrievable for the period of 5 years. If a supplier ceases business with thyssenkrupp rothe erde USA Inc., or the supplier is unable to maintain the quality records, the supplier shall provide the option for thyssenkrupp rothe erde USA Inc. to take possession of the records. Supplier quality records are not to be destroyed without written approval from thyssenkrupp rothe erde USA Inc.
5. All product supplied shall be authentic and conform to original equipment standards and designs and not be material that has been confirmed to be a copy, imitation or substitute that has been represented, identified, or marked as genuine, and/or altered by a source without legal right with the intent to mislead, deceive or defraud.

**Completed By:**

**Title:**

**Date:**

Completion of this Questionnaire does not signify approval of your company.



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## **FOR THYSSENKRUPP ROTHE ERDE USA INC. USE ONLY**

<b>Supplier Status:</b>	<b>Reviewer:</b>	<b>Date:</b>
Approved <input type="checkbox"/>	Name:	
Unapproved <input type="checkbox"/>	Title:	
<b>Comments:</b>		