

## Supplier Questionnaire

Please fill out this questionnaire and send it to Mr. Dirk Naundorf.  
 Fax +49 (40) 25165-582      Email: naundorf.d@leser.com

1. Address				
Company:				
Street:				
Zip Code, city:				
Country:				
Phone-No.:		Fax-No.:		
E-Mail address:		Homepage:		
2. Company Data				
Legal form:		Year of foundation:		
Subsidiary:	<input type="checkbox"/> yes <input type="checkbox"/> no	Holding company:		
D-U-N-S No.:				
	<b>Two years ago</b>	<b>Last year</b>	<b>Current year</b>	
Number of Employees:				
Sales turnover (in €):				
Sales turnover within home country (in %)				
Sales turnover - Exports (in %)				
R&D investment				
Rate of investment				
<b>Experience supplying to valve industry</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please mention some references)				
Business Language:	<input type="checkbox"/> German <input type="checkbox"/> English			
3. Contact persons				
	Name:	Telefon:	E-Mail:	Language:
Managing director:				<input type="checkbox"/> English <input type="checkbox"/> German
Sales:				<input type="checkbox"/> English <input type="checkbox"/> German
Production:				<input type="checkbox"/> English <input type="checkbox"/> German
Quality:				<input type="checkbox"/> English <input type="checkbox"/> German
Purchasing:				<input type="checkbox"/> English <input type="checkbox"/> German

## Supplier Questionnaire

4. Product range and place of production (only if address is different to topic 1.)		
<input type="checkbox"/> Duction iron and grey iron castings	<input type="checkbox"/> Stainless steel bellows	
<input type="checkbox"/> Steel castings	<input type="checkbox"/> Bursting discs	
<input type="checkbox"/> Shell moulding / Croning	<input type="checkbox"/> PTFE material	
<input type="checkbox"/> Investment casting	<input type="checkbox"/> Fasteners [Nuts and bolts]	
<input type="checkbox"/> Bar material	<input type="checkbox"/> Sealing	
<input type="checkbox"/> Springs	<input type="checkbox"/> Sheet metal form parts	
<input type="checkbox"/> Fittings and flange	<input type="checkbox"/> Change over valves	
5. Certificates		
<i>Approvals and Certifications</i>	<i>Certified since:</i>	<i>Valid until:</i>
<input type="checkbox"/> ISO 9001		
<input type="checkbox"/> TS16949		
<input type="checkbox"/> ISO 14001		
<input type="checkbox"/> PED 97/23 EC		
<input type="checkbox"/> AD 2000 – W0		
<input type="checkbox"/> Det Norske Veritas		
<input type="checkbox"/> Germanischer Lloyd		
<input type="checkbox"/> Lloyd's Register of Shipping		
6. IT-Equipment		
<i>CAD-Systems (version):</i>		
<i>Casting simulation software:</i>		
<i>ERP-System:</i>		
7. Product liability:		
<i>Product liability (for people):</i>	<input type="checkbox"/> yes <input type="checkbox"/> no	<i>Value (€):</i>
<i>Product liability (for assets):</i>	<input type="checkbox"/> yes <input type="checkbox"/> no	<i>Value (€):</i>
8. Further Information		