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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Angaben zur Firma (Company information) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Firma:  (Company) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Geschäftsbereich:  (Business area) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Straße:  (Street) |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| PLZ / Ort:  (Postal code & city) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telefonnummer:  (Phone number) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E-Mail-Adresse:  (E-Mail address) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Faxnummer:  (Fax number) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Allgemeine Angaben (General information) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gesellschaftsform:  (Corporate structure) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DUNS-Nummer:  (DUNS number) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gründungsjahr:  (Year established) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ggf. weitere Produktions-standorte  (If appropriate, additional production sites) | 1.)  2.)  3.)  weitere: | | | | |  | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| (other) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unternehmensstruktur (Corporate structure)  **bitte Organigramm beifügen** (Please enclose organizational chart) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ansprechpartner:  (Contact) | | | | | Name  (Name) | | | | | | | Telefonnummer  (Phone number) | | | | | | | E-Mail-Adresse  (E-Mail address) | | | | | | | | |
| Geschäftsführer:  (Managing director) | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | |
| Leiter kaufmännische Abteilung: (Manager of the Commercial Department) | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | |
| Leiter technische Abteilung: (Manager of the Technical Department) | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | |
| Leiter Produktion:  (Production Manager) | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | |
| Leiter Qualitätsmanagement:  (Quality Management Manager) | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | |
| Leiter Logistik und Versand: (Logistics and Shipment Manager) | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | |
| Sind entsprechende Stellen extern besetz?  (Are the corresponding positions externally occupied?) | | | | | Nein (No)  Ja, welche | | | | | | | | | | | | | | | | | | | | | | |
| (Yes, which) | | | | | |  | | | | | | | | | | | | | |  | | |
| Unternehmensgröße (Company size) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Anzahl der Beschäftigten:  (Number of employees) | Gesamt  (Total) | | | | | | Vertrieb und Verwaltung  (Sales and administration) | | | | | | | Entwicklung und Konstruktion  (Development and construction) | | | Produktion  (Production) | | | | | QS  (QA) | | | | | |
|  | | | | | |  | | | | | | |  | | |  | | | | |  | | | | | |
| Kunden (Customers) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welche sind Ihre  5 wichtigsten Kunden?  (Who are your  5 most important customers?) | 1.) | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 2.) | | |  | | | | | | | | | | | | | | | | | | | | |  | | |
| 3.) | | |  | | | | | | | | | | | | | | | | | | | | |
| 4.) | | |  | | | | | | | | | | | | | | | | | | | | |
| 5.) | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | |
| Beschaffung (Procurement) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welche sind Ihre  4 Haupt-lieferanten?  (Who are your  4 main suppliers?) | 1.) | |  | | | | | | | | | | | | | | | | | | | | | |  | | |
| 2.) | |  | | | | | | | | | | | | | | | | | | | | | |  | | |
| 3.) | |  | | | | | | | | | | | | | | | | | | | | | |  | | |
| 4.) | |  | | | | | | | | | | | | | | | | | | | | | |  | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | |  | | |
| Welche Materialien werden von Ihren Lieferanten bezogen?  (What materials are obtained from your suppliers?) |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Managementsystem (Management system) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ist in Ihrem Unternehmen ein Qualitäts-management-system integriert?  (Is a quality management system integrated into your company?) | Nein (No)  Ja, nach | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
| (Yes, acc. to) | | | | | | | | **(Bitte Zertifikat beilegen!** (Please enclose certificate!)  wenn ja, entfällt Punkt 3. „Sonstiges“  (If yes, Section 3 “Other” is not applicable) | | | | | | | | | | | | | | | |  | | |
| Durch welche Gesellschaft erfolgte die Zertifizierung?  (Through which company did the certification take place?) | Gesellschaft: | | | | | | |  | | | | | | | | | Datum: | | |  | | | | | |  | |
| (Company) | | | | | | |  | | | | | | | | | (Date) | | |  | | | | | |  | |
| Ist in Ihrem Unternehmen ein Umwelt-management-system integriert?  (Has an environmental management system been integrated into your company?) | Nein (No)  Ja, nach | | | | | | | |  | | | | | | | | | | | | | | | | | |  |
| (Yes, acc. to) | | | | | | | | **Bitte Zertifikat beilegen!** (Please enclose certificate!) | | | | | | | | | | | | | | | | | |  |
| Durch welche Gesellschaft erfolgte die Zertifizierung?  (Through which company did the certification take place?) | Gesellschaft: | | | | | | |  | | | | | | | | | | Datum: | |  | | | | | |  | |
| (Company) | | | | | | |  | | | | | | | | | | (Date) | |  | | | | | |  | |
| Sind in Ihrem Unternehmen ggf. noch andere Management-systeme integriert?  (Are other management systems possibly integrated into your company?) | Nein (No)  Ja, welche | | | | | | | |  | | | | | | | | | | | | | | | | |  | |
| (Yes, which) | | | | | | | | **Bitte Zertifikat beilegen!** (Please enclose certificate!) | | | | | | | | | | | | | | | | |  | |
| Durch welche Gesellschaft erfolgte die Zertifizierung?  Through which company did the certification take place? | Gesellschaft: | | | | | | |  | | | | | | | | | | Datum: | | |  | | | | |  | |
| (Company) | | | | | | |  | | | | | | | | | | (Date) | | |  | | | | |  | |
| Gibt es Beauftragte in Ihrem Unternehmen für?  (Are there appointees in your company for?) | Umwelt:  (Environment)  Arbeitssicherheit:  (Occupational safety) | | | | | | | | | Ja (Yes)  Ja (Yes) | | | | | Nein (No)  Nein (No) | | | | | | | | | | |  | |
| Sonstiges: | | | | | | | | |  | | | | | | | | | | | | | | | |  | |
| (Other) | | | | | | | | |  | | | | | | | | | | | | | | | |  | |
| Betriebs- und Produkthaftpflichtversicherung (Operating and Product liability insurance) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Besteht eine Betriebshaftpflicht-versicherung?  (Is there an operating liability insurance?) | | Nein (No)  Ja (Yes) | | | | | | | | | | | | | |  | | | | | | |  | | | | |
| Besteht zusätzlich eine Produkthaftpflicht-versicherung?  (Is there an additional product liability insurance?) | | Nein (No)  Ja, versichert für Folgeschäden  bis zu einer Summe von: | | | | | | | | | | | | | |  | | | | | | |  | | | | |
| (Yes, insured for consequential  damages up to a sum of) | | | | | | | | | | | | | | **Bitte gültige Police beilegen!**  (Please enclose valid policy!) | | | | | | |  | | | | |
| Produktionsangaben (Production details) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welche Hauptprodukte werden in Ihrem Unternehmen hergestellt?  (What main products are manufactured in your company?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Über welche Bearbeitungs-möglichkeiten verfügt Ihr Unternehmen?  (What processing options does your company have?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welche besonderen Verfahren werden eingesetzt?  (What special processes are used?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welche Fertigungs-einrichtungen sind vorhanden?  (What production facilities are available?) | | **wenn vorhanden, Bitte Maschinenliste mit beilegen!**  (If available, please enclose machinery list!) | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welches Arbeits-Schicht-Modell besteht in Ihrem Unternehmen?  (What work shift model does your company have?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wie viele Arbeitsstunden sind pro Schicht vorgesehen?  (How many working hours per shift are intended?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Sonstiges (Other) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Werden Fertigungs-überwachungen durchgeführt?  (Is production monitoring performed?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Werden Wareneingangs-prüfungen durchgeführt?  (Are incoming goods inspections performed?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gibt es eine regelmäßige Überwachung der Produktions-einrichtungen?  (Is there a regular monitoring of the production facilities?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Werden systematische Endkontrollen durchgeführt?  (Are final systematic inspections performed?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wird mit Prüfplänen gearbeitet?  (Is work performed with inspection plans?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wird mit Erstmuster-prüfberichten gearbeitet?  (Is work performed with initial sample test reports?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wurde in Ihren Unternehmen von anderen Firmen ein Audit durchgeführt?  (Did other companies perform an audit in your company?) | |  | | | | | | | | | | | | | | | | | | | | | | | | | |

**erstellt durch:** (drawn up by:)

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Datum, Name, Funktion (Date, Name, Position)

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Telefon, E-Mail (Telephone, E-Mail)

|  |  |
| --- | --- |
| Unterschrift (Signature) |  |