



Nifco UK Limited - Transport & Consumables Supplier Self Assessment Questionnaire

This questionnaire has been developed to assist in the evaluation of the ability of Suppliers to provide the services and/or goods required for a range of projects.

Your inability to answer some of the questions fully will not necessarily preclude your company from consideration as each company may differ in kind of products/services it provides and the criticality of those products/services may be a factor.

Please read the following completion instructions carefully:-

1. THE QUESTIONNAIRE MUST BE COMPLETED IN THE FORMAT GIVEN UNLESS OTHERWISE AGREED. Information forwarded in addition to that requested in the Questionnaire is welcomed. (See note at the end of the document).
2. All questions must be addressed. Please use the words NONE or NOT APPLICABLE (N/A) where necessary.
3. Except where requested, answers submitted MUST apply specifically to the Company named at the beginning of Section 1 and must be exclusive to the activities of Parent, Associate, Group or Subsidiary companies.
4. With regard to Section 3, please clearly identify the certification body and if you are a registered company please include supporting certificates/appendices and a copy of the latest third party audit findings. Copies of any 2nd party audit findings would also be appreciated.
5. INFORMATION GIVEN IN REPLY WILL BE TREATED IN STRICT CONFIDENCE.

1.0 - GENERAL DETAILS

- | | |
|-------|--|
| 1.1 | Name of Company |
| 1.1.1 | Address |
| | City |
| | Post Code |
| 1.1.2 | Contact Name |
| 1.1.3 | Telephone Number |
| 1.1.4 | Fax Number |
| 1.1.5 | State your email address (if applicable) |

1.3 Is your Company a Public / Private Company? Public Private

1.4 Name of Parent Company or
Group / Affiliates, if any
Address

City
Post Code
Country

1.5 Please advise...
(a) VAT Number

1.6 Are the company premises Leasehold / Freehold / Rented Leasehold Freehold Rented

1.7 Year Company Established

2.0 - DETAILS OF PRODUCTS AND SERVICES

2.1 a) Please provide your current workload as a percentage of your total capacities, i.e. 25%, 50% for:

2.2 Which Products/Services are normally Sub-Contracted?

2.3 Please specify major Sub-Contractors (Provide separate documentation if required)

3.0 - QUALITY ASSURANCE AND QUALITY CONTROL

3.1 Does your Company have an Operational Quality System e.g. ISO9001? Yes No

3.2 Which International System is it based on?

3.3 What date was your System established??

3.4 Has your System been independently assessed? Yes No
If Yes, state Assessment Body and date assessed. Please provide copies of relevant certificates. (See Documentation section later.)

3.5 Is the QA function specifically represented in your Company's Organisation? Yes No

3.6 Does your System cover evaluation and Control of Sub-Suppliers? Yes No

ANY ADDITIONAL INFORMATION YOU WISH TO INCLUDE?

THE INFORMATION SUPPLIED IN THIS QUESTIONNAIRE AND SUPPORTING DOCUMENTS IS CORRECT TO THE BEST OF OUR KNOWLEDGE.

Name

Position

Date

Contact Tel Number

HEALTH, SAFETY & ENVIRONMENTAL

1.0 - HEALTH, SAFETY & ENVIRONMENTAL POLICY AND ORGANISATION

1.1 Please forward a copy of your Health, Safety & Environmental Policy Document if available Are these to follow? Yes No N/A

1.2 Have any Environmental proceedings been taken out against your company? Yes No

1.3 Please provide copy of your ISO 14001 certificate if available Are these to follow? Yes No N/A

2.0 - PLANNING

2.1 Do you have systems in place to identify HSE Legislation that is relevant to your operations / business? Yes No

2.2 Do you have a documented process for assessing the significance of the environmental aspects and impacts of your business? Yes No

2.3 Do you set objectives and targets for improvements in your environmental impacts? Yes No

2.4 Do you monitor, review and audit your progress against environmental objectives & targets? Yes No

3.0 - SAFETY ORGANISATION

3.1 Please give the name and title of person responsible for safety on site.

3.2 Is your Company a member of any safety organisation, professional body? If so, give details. Yes No

3.3 Does your company maintain product safety data sheets where applicable? Yes No

4.0 - RISK ASSESSMENT

4.1 Do you have a documented process for assessing risks to the health & safety of employees and others to the environment? Yes No

5.0 - COSHH ASSESSMENT

5.1 Do you have a documented process for assessing the risks created by the use of hazardous substances? Yes No

6.0 - MANUAL HANDLING

6.1 Do you have arrangements in place to protect your employees from injuries due to manual handling? Yes No

7.0 - PLANT AND EQUIPMENT

7.1 Do you have a documented process for ensuring that safety of plant and machinery, and specifically for lifting machinery and accessories? Yes No

8.0 - MANUFACTURING HEALTH AND SAFETY

8.1 Do you have documented procedures to ensure the safety of your employees and others exposed to risks from manufacturing activities? Yes No

9.0 - DESIGN AND MANAGEMENT

9.1 Do you have a documented process for ensuring that designers take health, safety and environmental considerations into account: and the co-ordination of health, safety and environmental issues between designers, construction staff and sub-contractors? Yes No

10.0 - INSPECTION AND AUDITING

10.1 Do You have a formal process to periodically review the adequacy and effectiveness of your HSE management system? Yes No

11.0 - INSURANCE DETAILS (See documentation later).

If your company is a transport company please provide full details of insurance cover

I certify that the details given in this assessment are correct and accurate

Name

Position

Date

Phone

Email

Any additional Information you would like to supply

DOCUMENTATION TO COMPLETE THE EXERCISE, WE REQUIRE VARIOUS DOCUMENTS TO BE SENT TO US AS DETAILED BELOW:

Document (General Details)	Related Questionnaire Section
1) An organisation chart of Company officials showing their names and titles.	Section 1.0
2) If necessary, copies of relevant certificates for Quality & Environmental System assessment.	
3) Copies of your Insurance details for Employees Liability, Public & Product Liability & Contractors.	Section 11.0

PLEASE FEEL FREE TO ENCLOSE ANY ADDITIONAL LITERATURE BROCHURES ETC. YOU FEEL NECESSARY TO GIVE A GREATER UNDERSTANDING OF THE SCOPE OF PRODUCTS/SERVICES YOU PROVIDE.

FOR PREVIOUSLY COMPLETED QUESTIONNAIRES AND/OR THE RELEVANT ACCOMPANYING DOCUMENTATION, PLEASE SEND TO THE ADDRESS BELOW:

Postal Address:	Telephone Number	Email Address
Nifco UK Ltd Yarm Road Stockton-on-Tees United Kingdom TS18 3RX	+44 (0) 1642 - Direct Fax Number +44 (0)1642-	@nifcoeu.com