

CORPORATE QUALITY ASSURANCE SUB-VENDOR QUESTIONNAIRE

i.	Item/Scope of Sub-contracting							
ii.	Address of the registered office	Details of Contact Person						
		(Name, Designation, Mobile, Email)						
iii.	Name and Address of the proposed Sub-vendor's works	Details of Contact Person:						
	where item is being manufactured	(Name, Designation, Mobile, Email)						
iv.	Annual Production Capacity for proposed item/scope of							
	sub-contracting							
v.	Annual production for last 3 years for proposed item/scope							
	of sub-contracting							
vi.	Details of proposed works							
1.	Year of establishment of present works							
2.	Year of commencement of manufacturing at above works							
3.	Details of change in Works address in past (if any)							
4.	Total Area							
	Covered Area							
5.	Factory Registration Certificate	Details attached at Annexure – F2.1						
6.	Design/ Research & development set-up	Applicable / Not applicable if manufacturing is as						
	(No. of manpower, their qualification, machines & tools	per Main Contractor/purchaser design)						
	employed etc.)	Details attached at Annexure – F2.2						
		(if applicable)						
7.	Overall organization Chart with Manpower Details	Details attached at Annexure – F2.3						
	(Design/Manufacturing/Quality etc)							
8.	After sales service set up in India, in case of foreign sub-	Applicable / Not applicable						
	vendor							
	(Location, Contact Person, Contact details etc.)	Details attached at Annexure – F2.4						
9.	Manufacturing process execution plan with flow chart	Details attached at Annexure – F2.5						
	indicating various stages of manufacturing from raw							
	material to finished product including outsourced process,							
	if any							
10.	Sources of Raw Material/Major Bought Out Item	Details attached at Annexure – F2.6						

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11.		ontrol exercised during	•	Details attached at Annexure – F2.7				
		I, in-process, Final Testing	, packing					
12.	Manufacturing facilities				Details attached at Annexure – F2.8			
	(List of machi	nes, special process facilities, m	aterial handli					
13.	Testing facil	ities		Details attached at Annexure – F2.9				
	(List of testing	ng equipment)						
14.	If manufactu	uring process involves fabric	cation then-	Applicable / Not applicable				
	List of qualit	fied Welders		Details attached at Annexure – F2.10				
	List of qualit	fied NDT personnel with ar	ea of speciali	(if applicable)				
15.	List of out-	sourced manufacturing pr	ocesses with	Applicable / Not applicable				
	Vendors' na	mes & addresses						
				Details attached at Annexure. –F2.11				
				(if applicable)				
16.	Supply reference list including recent supplies				Details attached at Annexure – F2.12			
					(as per format given below)			
Project packag					no/date Supplied Quantity Date of Supply			
17.	Product	satisfactory performa	nce fee	dback	Attached at	annexure - F2.13		
1 / .	letter/certificates/End User Feedback				Attached at afficacie 1 2.13			
18.	Summary of Type Test Report (Type Test Details, Report				Applicable / Not applicable			
10.	-	Date of testing) for the proj						
		igher rating)	•	Details attached at Annexure – F2.14				
		rts need not to be submitted		(if applicable)				
19.	Statutory /	mandatory certification	for the pro	Applicable / Not applicable				
	product							
	_				Details attached at Annexure – F2.15			
					(if applicable)			
20.	Copy of ISO 9001 certificate				Attached at Annexure – F2.16			
	(if available)							
21.	Product ted	Product technical catalogues for proposed item (if				Details attached at Annexure – F2.17		
	available)							
Namo	Name: Desig:					n:	Date:	
Comp	anv's Seal/Sta	ımn	<u> </u>				<u> </u>	

Company's Seal/Stamp:-

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