

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 where item is being manufactured		Details of Contact Person:				
			(Name, Designation, Mobile, Email)				
iv.	Annual Production Capacity for	proposed item/scope of					
	sub-contracting						
v.	Annual production for last 3 years	s 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						

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10.	•	ontrol exercised during	-	f raw	Details attach	ched at Annexure	- F2.6	
		I, in-process , Final Testing	g, packing					
11.	Manufacturi			Details attached at Annexure – F2.7				
		nes, special process facilities, n	naterial handli					
12.	Testing facil	ities		Details attached at Annexure – F2.8				
	(List of testing	ng equipment)						
13.		uring process involves fabri	cation then-	Applicable / Not applicable				
	List of quality	fied Welders		Details attached at Annexure – F2.9				
	List of quality	fied NDT personnel with ar	(if applicable)					
14.	List of out-s	sourced manufacturing p	rocesses witl	Applicable / Not applicable				
	Vendors' na	mes & addresses						
				Details attached at Annexure. –F2.10				
				(if applicable)				
15.	Supply reference list including recent supplies				Details attached at Annexure – F2.11			
					(as per format given below)			
Project packag					no/date Supplied Quantity Date of Supply			
puenus				1, ,		T0.10		
16.	Product	satisfactory perform	ance fee	edback	Attached at	annexure - F2.12		
	letter/certificates/End User Feedback Summary of Type Test Report (Type Test Details, Report				A P 11 /N / P 11			
17.	-			Applicable / Not applicable				
	No, Agency,	Date of testing) for the pro	posed produc					
	(similar or h	igher rating)		Details attached at Annexure – F2.13				
	Note:- Repor	rts need not to be submitted	l	(if applicable)				
18.	Statutory /	mandatory certification	for the pro	Applicable / Not applicable				
	product							
				Details attached at Annexure – F2.14				
				(if applicable)				
19.	Copy of ISO 9001 certificate			Attached at Annexure – F2.15				
	(if available)							
20.	Product technical catalogues for proposed item (if				Details attached at Annexure – F2.16			
20.	available)							
I								
Name	Name: Desig:					n:	Date:	
Comp	anv's Seal/Sta	mn·-						

Company's Seal/Stamp:-