

Address

Company name	<input type="text"/>
Street / P.O. Box	<input type="text"/>
Postal code	<input type="text"/>
Place	<input type="text"/>
Country	<input type="text"/>
Phone	<input type="text"/>
Fax	<input type="text"/>
E-Mail	<input type="text"/>
Website	<input type="text"/>

General company information

Type of company	<input type="text"/>
Group affiliation	<input type="text"/>
Shareholdings	<input type="text"/>
Head office	<input type="text"/>
Branches	<input type="text"/>
Production facilities	<input type="text"/>
Company established since	<input type="text"/>
Industry sector	<input type="text"/>
Supplier to	<input type="text"/>
Significant competitors	<input type="text"/>
References	<input type="text"/>
Negotiating	<input type="text"/>
Bank details	<input type="text"/>

Property	<input type="checkbox"/> Rented <input type="checkbox"/> Owned
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Comments	<input type="text"/>
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Contact persons

Management board

Title

First name

Last name

Email

Phone

Technical Management

Title

Fist name

Last name

Email

Phone

Sales Manager

Title

First name

Last name

Email

Phone

Materials / Logistics Management

Title

First name

Last name

Email

Phone

QM Manager

Title

First name

Last name

Email

Phone

Disposal Management

Title

Fist name

Last name

Email

Phone

Key company data

Development of sales in EUR last 3 years total

Year	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sales	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of employees

Admin	<input type="text"/>	QM	<input type="text"/>
Development	<input type="text"/>	Production (management/scheduling)	<input type="text"/>
Design	<input type="text"/>	Production (personnel)	<input type="text"/>
Process engineering	<input type="text"/>	Regulatory affairs	<input type="text"/>

Current capacity utilization

High

Medium

Low

Your position in global market context?

Which are your most important raw materials and who are your most important sub-suppliers?

Shift-work

Yes Shift

No

**Does your company have experience in using extended work benches?
(e.g. increasing capacity)**

Yes

No

Does your company have experience in the medical/pharmaceutical fields?

Yes Which customers/suppliers

No

Technology

Production range/Sales range

Production processes

Machinery (where applicable state sizes, dimensions, closing pressures, dosage weight etc.)

Materials/Workstuff processed

Infrastructure/Working environment

Quality management

Does your company have an established quality management?

Yes according norm

No

Verification of quality management systems

QM system to	Certified by*	Date	Valid until
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Auditing by customer	Result	Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

*Please submit a copy of the above mentioned certificates

Development

Which equipment is available?

Development (prototyping, experimental)		
Design		
CAD-systems	Number of CAD-workstations	<input type="text"/>
Cleanroom	ISO class	<input type="text"/>

Which laboratory and test equipment is available?

Is there a technical institution or equipment and process developer at the location?

Are material/workstuff development facilities available?

Logistics / order processing

Collection by customer is

possible

not possible

Maximum delivery time

days

days on average

Processed by

Name

Position

Date

Signature