

**POGGEN-AMP NAGARSHETH POWERTRONICS
PRIVATE LIMITED**

VENDOR ASSESSMENT FORM

- Vendor's Name :
- Type of Concern : Proprietary / Partnership / Pvt. Ltd. / Ltd
- Address (Office) :
- Address (Works) :
- Contact Person & Designation :
- Telephone / Fax Nos :
- Mobile Nos. :
- E-Mail Address :
- Weekly Off / Working Hours :
- Business Activities : Trading () Manufacturing () Services
()
- No. of Employees : Technical () Non-Technical ()
- Year of Commencement :
- G.S.T. No. :
- C.S.T. No. :
- E.D. Tariff No. :
- SSI Regn. No. (if applicable) :
- Turnover of Previous Year :
- Projected Current Year Turnover :
- Do you hold ISO 9000 / 14000 Certification :
- Business with us during last year :
- Range of Products / Services Offered

F:PUR:01

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VENDOR ASSESSMENT FORM

Major Customers

(Attach separate sheet if required)

Particulars of Plant & Machinery

Details of Quality Control Department

- Is regular calibration of all instruments done : () Yes () No
- Do you have Quality Control Laboratory : () Yes () No
- Major testing Instruments available

Information Furnished By

Name :
Designation :
Date :
Place :

Signature with company's seal

**FOR POGGEN-AMP NAGARSHETH POWERTRONICS PRIVATE
LIMITED**

INTERNAL USE ONLY

Status of Supplier : () New () Established

If new supplier/new product, type of Assessment Status:

- () By Visit () By Registration Form Details
() By Placing Trial Orders () Based on Past Experience

REMARKS OF THE ASSESSMENT AUTHORITY

Assessment Status : () APPROVED () REJECTED

Signature of Authorised Person :