**广东天元实业集团有限公司**

**供应商调查问卷-设备类**

**申明：**

1. 本调查旨在了解供方信息，按照供应商选择标准进行供应商的开发、选择。  
2. 本公司对企业提供的信息承担保密责任，这些信息不会被用于本公司选择供方以外的其它商业目的。  
3. 填表企业明确了解并同意接受本公司或由本公司安排的现场考察。  
4. 填表企业对所填内容的真实性负责。  
**5. *以下所有要求填写的信息不能为空，如果贵公司认为不适用，可以填写不“不适用”或“无”。***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **一、组织状况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 供应商名称： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 注册地址： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 生产厂址： | | | | | | | | | | | | | | | | | | | 企业网址： | | | | | | | | | | | |  |
| 成立时间： | | | | | | | | | | | | | | | | | | | 注册资本： | | | | | | | | | | | |
| 员工状况 | | 总数： 　 人； 其中管理：　　　人；技术　　　人；质检　　　人  学历构成： 研究生及以上：　　人；大专本科　　人；高中及以下　　人 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 企业性质 | | 生产　　 贸易　　 经销 | | | | | | | | | | | | | | | | 民营 国有 合资 外资 | | | | | | | | | | | | |
| 法人代表： | | | | | | | | | 职务： | | | | | | | | | | | | | | | | | | | | | |
| 电话: 传真: E-Mail: 微信： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 企业负责人： | | | | | | | | | 企业负责人： | | | | | | | | | | | | | | | | | | | | | |
| 电话： 传真: E-Mail: 微信： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 业务联系人： | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 电话: 传真: E-Mail: 微信： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 品质负责人： | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 电话： 传真: E-Mail: 微信： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 开户名称： | | | | | | | | | | | | | | | | 开户银行： | | | | | | | | | | | | | | |
| 银行账号： | | | | | | | | | | | | | | | | 企业信用等级： | | | | | | | | | | | | | | |
| 营业执照号： | | | | | | | | | | | | | | | 税务登记证号： | | | | | | | | | | | | | | | |
| 供应商发票类型： 增值税专用发票 非增值税专用发票 税率： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否具有进出口权： 有- 证明文函 无 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **二、企业生产情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 主要生产产品： 为我司提供产品： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 年营业额： 万元 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工厂厂房面积： 平米， 库房面积： 平米， 办公面积： 平米 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 交货周期： 天 （样品生产周期： 天） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 生产前置期： （天） 接单→出货： （天） 运输+安装： (天) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 新品开发： 能自主设计开发新产品 　 联合开发 委托开发 无开发能力 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否有最小生产批量/最低订货要求： 有 无 （最小量是： ） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **三、主要产品情况** （说明：若有需要，请自行增加行/列数） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 主要产品名称 | | | | | 销售额 | | | | | | | | 占公司总业务的份额 ( %) | | | | | | | | | | 优势概述 | | | | | | | |
|  | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | |
|  | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | |
|  | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | |
| **四、主要生产、检测设备情况**（说明：若有需要，请自行增加行/列数） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 生产设备 | 设备名称、型号 | | | | | | 产地 | | | | | 制造商名称 | | | | | | | | | | 数量 | | | | 购入日期 | | | | 备注 |
|  | | | | | |  | | | | |  | | | | | | | | | |  | | | |  | | | |  |
|  | | | | | |  | | | | |  | | | | | | | | | |  | | | |  | | | |  |
|  | | | | | |  | | | | |  | | | | | | | | | |  | | | |  | | | |  |
| 检测设备 |  | | | | | |  | | | | |  | | | | | | | | | |  | | | |  | | | |  |
|  | | | | | |  | | | | |  | | | | | | | | | |  | | | |  | | | |  |
|  | | | | | |  | | | | |  | | | | | | | | | |  | | | |  | | | |  |
| 测试设备校准情况： 有计量检定能力 全部委托外部检验计量机构 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **五、售后服务情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 服务范围： 全国 局部地区 质保期限： 一年 三年 其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 服务响应： 24小时内到达现场 其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 服务能力： 由贵司技术人员提供 外包 其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否有专业的技术人员提供产品应用咨询,技术支持及现场培训指导服务： 是 否 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **六、主要客户及项目情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 客户名称 | | | 客户所属行业 | | | 项目名称及内容 | | | | | | | | | | | 项目实施地点 | | | 主要应用到的产品 | | | | | 合同金额 | | | 项目开始/完成日期 | | |
|  | | |  | | |  | | | | | | | | | | |  | | |  | | | | |  | | |  | | |
|  | | |  | | |  | | | | | | | | | | |  | | |  | | | | |  | | |  | | |
|  | | |  | | |  | | | | | | | | | | |  | | |  | | | | |  | | |  | | |
| **七、企业通过的认证 （是否属于强制执行有关质量或安全认证的行业：** 是 否 **）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 资质证书名称类型 | | | | 认证机构 | | | | | | | 适用于 | | | | | | | | | | | | | 签发日期 | | | | | 有效期至 | |
|  | | | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |  | |
|  | | | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |  | |
| **八、专利/专有技术/许可 （若没有，则填写“无”）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 专利/专用技术/许可名称 | | | | | 授予机构 | | | | | | | | | 适用于 | | | | | | | 有效期 | | | | | | 特点与价值 | | | |
|  | | | | |  | | | | | | | | |  | | | | | | |  | | | | | |  | | | |
|  | | | | |  | | | | | | | | |  | | | | | | |  | | | | | |  | | | |
| **九、基本资质信息（原件盖章）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 公司介绍 营业执照复印件 税务登记证复印件 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 组织机构代码证 企业组织架构图 银行开户证明 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 产品QC工程图 产品生产许可证 产品工艺流程图 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ISO9001证书复印件 ISO14001证书复印件 业务联系人授权书 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **十、合作方面问题回答** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1.贵公司是否制定有完善的客户信息保密制度并严格执行？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2.是否有对C-TPAT进行管理？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 答： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3.是否对知识产权进行管理？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 答： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

填表人（如非业务联络人或法人代表，需另附授权书）：

日期：

企业盖章：