



NEW VENDOR SELF-ASSESSMENT QUESTIONNAIRE

[CONFIDENTIAL]

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1.0 Vendor Name:

Address	
Phone	
Fax	
Email	
Website	

India office: (If different than Above)

Address	
Phone	
Telex	
Fax	
Email	
Website	

2.0 Vendor Type / Services:

Manufacturer

Suppliers

Services

Description	Details
Products / Services being offered to GVKBIO	
Other Products / Services offered by the Vendor	

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3.0 Business information: *Kindly submit scan copy of relevant documents along with duly filled questionnaire*

Description	Details
Year of Establishment	
Fiscal year end date	
Is the company a public limited company: if yes	
Is the company a private company: if yes	
Please explain whether this is an independent company, subsidiary, etc	
Please list all related companies and explain their relationship to this company	
Factory Registration No & Date.	
PCB & Explosives (If Applicable) License No & Validity	
Income tax verification certificate No and Date	
GST Registration No & Date	
PAN No & Date	
IEC CODE	
Transaction Currency	
Manufacturer or Trader	
Catalogue/List of Chemicals Offered	
Does your Company comes under MSMED Act 2006	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please share the Registration Copy with us.

Note: Please submit copy of all relevant documents for our records.

4.0 Key Contacts:(Also attach company's organogram)

Contact Person	Name	Designation	Mobile No	Desk Telephone	Email
General Correspondence					
Escalation contact					

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Commercial Head					
Technical Head					
Finance Head					

5.0 Financial status:

(Furnish 5 years' status including the current year for Overall Group and Group doing business with GVK. Incase of International suppliers India Business revenue to be specified seperately)

Information	Current	<past year>	<past year>	<past year>	<past year>
Revenue (Gross sales)					
Revenue (Gross sales)					

6.0 Market Share & Major Competitor:

Product	Sizes	Market Share	Competitors

7.0 Bank:

Name & Address of Bankers		
Bank Guarantee Limit		
Credit Limit		
Account no / RTGS details		
SWIFT Details		

8.0 Quality/Safety Management Certification & Accreditations :

(Also attach photocopies of regulatory body certificates)

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S.No	Certification Body	Description & Validity	Remarks
1			
2			
3			

9.0 Clientage of Customers:

Description	Details	Goods Supplied Value		
		<Year-1>	<Year-2>	<Year-3>
Customer Name-1				
Value of Business with currency				
Contact person				
Email ID& Contact Nos				
Customer Name-2				
Value of Business with currency				
Contact person				
Email ID& Contact Nos				

10.0 Facilities & Resources:

(If the space is not enough attach as annexure)

S. No	Description	
1	Total Plant Area a) Covered b) Uncovered c) Owned d) Leased	
2	Number of Warehouses with Locations	
3	Total no. of employees on date a) Administrative b) Technical c) Quality (Control & Assurance)	

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4	Are the minimum requirements, experience & qualification laid down for all employees	
5	Are the Job role & performance metrics defined & communicated for all employees	

11.0 Critical Qualification Parameters: If you don't meet any of the below Parameters kindly revert with action plan and timelines to implement the process for compliance of below Parameters. *(Minimum Score of 75% is mandatory for initial qualification)*

Sr. No	Category	Parameter	Weightage	Supplier Feedback (Yes/No)	Comments
1	Ethical Business Practices	Does your company follow Code of Conduct and avoidance of Conflict of Interest to promote Ethical Business practices internally & with external stakeholders?	15%		
2	EHS	Does your company follow Social Accountability (S A) 8000 Standards? If Yes, please confirm if you are complying with SA Key points like Freedom of Association & Right to Collective Bargaining, Working Hours, Management System	5%		
3	EHS	Does your company understand & follow PSCI Principles?	10%		
4	EHS	Does the company ensure Safety & Regulatory compliance as per law of Land in day to day Operations?	10%		
5	EHS	Is safety and health training provided for management and employees?	5%		
6	EHS	Does your company maintain and Provide MSDS for all the Chemicals supplied?	10%		
7	EHS	Does the company prohibit engagement of Child labor/Human Right exploitation in all its operations?	10%		

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8	EHS	Does your company follow Environmental protection guidelines & encourage continuous improvements in environmental performance?	5%		
9	EHS	Does the company promote the culture of social responsibility & sustainability?	5%		
10	EHS	Does your company have a policy for Sustainable/Responsible procurement from your Suppliers?	5%		
11	Quality	Are there the documented specifications & test procedures for analysis of products?	5%		
12	Quality	Is the company prepared to provide the relevant quality/test documents for supplies?	5%		
13	Quality	Does the company have SOP on complaints & does it address the corrective & preventive actions for Quality Complaints?	10%		

12.0 Supply Management:

S.No	Description	Details
1	What are your usual payment terms?	
2	How Many days of Finished Goods Inventory is maintained by you for your regular list of products?	
3	What are the General Supply lead times from Order date for your products?	
4	Will lead time reduce if Tentative forecasts are given and what are the revised lead times?	
5	Shipping locations	
6	Confirm the feasibility to provide digitisation of invoice.	

13.0 Declaration:

I hereby declare that I am authorized on behalf of my company to share the requisite information and all the information shared above is true and can be supported with required documents and proofs.

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I will inform to GVK BIO about any changes / additions in my company`s compliance status.

I understand and accept that in the event of any information found to be false or Incorrect, GVK BIO be terminating my company association as Vendor with GVK BIO.

My company will be liable for any legal implication arising due to false declaration and GVK BIO will not be responsible for the same.

Description	Details	Company Seal
Name		
Designation		
Signature		
Date		