BHARAT SEATS LIMITED

Vendor Introduced by:

ı						
ı	Name:	Rahul	Decianation:	AM	Data:	1
ı	ivallie.		Designation.		Date.	1

VENDOR QUESTIONNAIRE

1.	Com	pany's	Profile
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. Company's Profile:					
1.1 Name Of Company:					
Faurecia					
1.2 Address Of Company	:				
Registered Office:		Head Office:		Plant:	
Gurgaon		Gurgaon		Manesar	
Telephone:		Telephone:		Telephon	e:
1212121212					
FAX:		FAX:		FAX:	
e-mail:		e-mail:		e-mail:	
adfaffaf@gmail.com					
1.3 Contact Persons:					
Name:	Designati	on:	Contact No. Office:		Contact No. Residence:
sdfsdf	sdfsd		1321354353		
4. 4. Duo duot Manuela at	d Du Communica				
1.4 Product Manufactured			0 1 ()		lo
Name Of Product:	Main Cus	tomer:	Supply(year):		%of annual Turn over:
mechanism					
1.5 Certification Details:					
Is your company certified	I for ISO/ OS/ TS/	TDM/ Any other quali	ity system (If yes then	furnish th	a balow datails):
No	1101 100/ 40/ 10/	Ti Mi Any Other quan	ity system (ii yes then	i iuiiiisii tii	e below details).
Name Of Quality System:		Certifying Agency:	· Year of (ertification:
tumo or quanty oyotomi		Corting rigority:		1 34. 5. 5	
1.6 Do you have Bar-Cod	ing System for M	laterial Supply? If yes	since which year:		
2017					
1.7 Details Of Plant:					
a) Total Area(sq-mts):	b) Total C	overed Area(sq-mts):	c) Connected Electrical Road(kva):		d) Availability of alternate source of Electricity(In-House):
40D / 11 / 11			<u> </u>		
1.8 Partnership / Joint-ve					-
Description & Name:	Date Of A	Association:	Partnership:		Remarks:
1.9 Other Details:					
	annum (w r t BCI	'e Parte\:	h) Spara Canacity a	vailable fe	r PSI (in %).
a) Installed Capacity per a	aimum (w.r.t BSL	. o raitoj.	b) Spare Capacity a	valiable 10	1 DOE (III /0).
1.10 Mode of Material Tra	ansnort.		120.00		
1.10 Mode of Material Fra Own	ansport.				
1.11 Future Expansion PI	ans Dotails of B	lan with Target Date:			
2021	ans , Details of P	ian with ranget Date:			
nttp://14.141.50.214:85/data/Finan	cial File/ (*Copy and	paste this link on web browse	r to download file)		
	\ Copy and	F === 10 400 010W36	dominous moj		
. Financial's Details:					

2.1 Attach Balance Sheet for last Years(as	Attach Balance Sheet for last Years(as annexure):						
http://14.141.50.214:85/data/Financial_File/SMIR_FORMA	T (2) F10010 11-03-2019 112503.xls (*Copy and paste thi	s link on web browser to download file)					
2.2 Company's Bankers Details:							

2.2 Company 3 Bankers Details.						
Name Of Bank:	Address:	Telephone Nos:				
hdfc	delhi	1234567890				

2.3 Turnover Details of Pr	revious Year:					Ι		
Name Of Customer:		300	ver(in Rs Lac	s):		Remarks:		
ITIOII		300						
2.4 GST No.:								
2.4 GOT NO								
2.5 TIN No.:								
0.0 O.L. T. N.								
2.6 Sales Tax No.:								
2.7 Excise Registration N	lo.:							
2.8 Permanent A/C No.:								
2.9 TDS A/C No.:								
3. Financial's Details:								
3.1 Total Employees:								
Permanent:	Unionis	ed:		Non-Unionis	sed:		Casua	als:
245	0			245			300	
i) Managers:								
ii) Supervisors:	Degree	Holder:		Diploma Ho	lders:		Other	s:
25	10	Tioladi.		08	14010.		7	<u>. </u>
iii) Production:		a) Direc	ct:			b) Indirect	:	
Direct ITI:	Direct I	180		Indirect ITI:		20	Indiro	ect NonITI
Direct III.	Directi	NOIIIII.		mairect III.			mane	CUNOTITI
iv) QA:								
8								
v) Administration:								
3.2 Do you have worker's	Union:							
No								
3.3 Is There any Long Ter	m Settlement	with the Ur	nion?:					
3.4 Give details of Strike	l ock out ao sl	ow etc duri	ing the last 3	vears if any:				
5.4 Give details of other	Lock out go 31	ow cic dan	ing the last o	years in arry.				
3.5 How is the IR situation	n?:							
2.6 Number of chifts timir	200							
3.6 Number of shifts timir	igs:							
3.7 Details Of Training Pro	ograms:							
a) Annual Training Plan?:	:	b) Trair	ning Programi	mes being pl	anned	c) Training	Cond	lucted Last year (in NOS):
Yes		Internal	Target):					
d) Foreign Training If any	:							
Subject Covered:								
•••		01.11				NAV . 1		
Managers:		Staff:				Workmen:		
4. Technical Details:								
4.1 Details of Machinery 8 S.No:		ad Maka	04		Tuna (C	DM/CDM/CI	NC.	Domorko/Durnoco
3.NO:	Description a	na wake:	Qty:		etc.):	PM/SPM/CI	NC	Remarks/Purpose:
1	molding		5		gpm			
Details of other Machinar Not Uploaded	y & Equipmen	t (Attach se	eparate sheet)):				
4.2 Details of In-house Te	esting & Inspec	tion Facilit	ties:					
S.No:		tion and N		Qty:			Purpo	se/Remarks:

4.3 R. 8.0 Facilities (if yes attach separate sheet giving details e.g.CAD / CAM / CAE facilities trained Man-power etc.Also turnish details of products designed & developed during last two years): Details of other RAD Facilities (Attach separate sheet):		f other In-house Testing I.50.214:85/data/Technical_File/S				aste this link on web b	rowser to	download file)		
Details of other R&D Facilities (Attach separate sheet):	4.3 R & D furnish d	Facilities (If yes attach	separate	sheet giving details e.	g.CAD / CAM / CA					
Al Source of Raw Material (BSL Related Product):		f other DOD Facilities (A	ttaab aan	arata abaat\.						
4.4 Source of Raw Material (BSL Related Product): S.No: Description: Source: Remarks: Details of other Raw Materials Facilities (Attach separate sheet): Note Uplanded 4.5 Tracebility (Kindly define your product Traceability System in separat sheet): 4.6 Describe the Reaction Plan for Non-conforming products (Attach separate sheet): http://ii.i.d.f.so.gribe.com/products/rechnoal_File/SMR FORMAT (1) F10010 11-03-2019 112702.xls. ("Copy and paste this link on web browser to download file) 4.7 Any Special Process/Facility: Yes 4.8 Rejection Monitoring System: No 4.9 Qustomer Satisfaction Index/Trent: Yes 4.10 Give details of Inspection Procedures(Sampling Self-certification etc.): 4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are current using): a) IS/ ISO*		•	ttach sep	arate sneet):						
Description: Description: Source: Remarks:			Polatod B	roduct):						
Details of other Raw Materials Facilities (Attach separate sheet): Not Uponded 4.5 Tracebility (Kindly define your product Traceability System in separat sheet): 4.6 Describe the Reaction Plan for Non-conforming products (Attach separate sheet): http://fit.141.50.214.85datatFochnical, File-SMIR, FORMAT (I) F10010 11-03-2018 112702.xls ("Copy and paste this link on web browser to download file) 4.7 Any Special Process/Facility: Vas 4.8 Rejection Monitoring System: No 4.19 Customer Satisfaction Index/Trend: Yos 4.10 Give details of Inspection Procedures(Sampling Self-certification etc.): http:///14.141.50.143.85datatForeIndexial, File-SMIR, FORMAT (2) F10010 11-03-2019 112702.xls ("Copy and paste this link on web browser to download file) 4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are current) a) IST/ISO*					Caurage		Domork			
A.6 Describe the Reaction Plan for Non-conforming products (Attach separate sheet):	3.NO:	L	escriptio	n:	Source:		Remark	8.		
A.5 Tracebility (Kindly define your product Traceability System in separat sheet):	Dotails of	f other Pay Materials Ea	cilities (A	ttach congrato choot):						
4.6 Describe the Reaction Plan for Non-conforming products (Attach separate sheet): http://l.4.11.50.214.85/data/Tachrical, FlioSMIR_FORMAT (I) F10010_11-03-2019_112702.xls_(*Copy and paste this link on web browser to download flie) 4.7 Any Special Process/Facility: Yes 4.8 Rejection Monitoring System: No 4.9 Customer Satisfaction Index/Trend: Yes 4.10 Give details of Inspection Procedures(Sampling Self-certification etc.): http://l.4.11.50.214.85/data/Tachrical_FlioSMIR_FORMAT (2) F10010_11-03-2019_112702.xls_(*Copy and paste this link on web browser to download flie) 4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are current) a) IS / ISO* Yes Yes			cilities (A	mach separate sheet).						
4.6 Describe the Reaction Plan for Non-conforming products (Attach separate sheet): http://l4.141.50.214.895.data/Technical_Fise/SMIR_FORMAT (1) F10010 11-03-2019 112702.xis. (*Copy and paste this link on web browser to download file) 4.7 Any Special Process/Facility: Yes 4.8 Rejection Monitoring System: No 4.9 Customer Satisfaction Index/Trend: Yes 4.10 Give details of Inspection Procedures (Sampling Self-certification etc.): http://l4.141.50.214.895.data/Technical_Fise/SMIR_FORMAT (2) F10010 11-03-2019 112702.xis. (*Copy and paste this link on web browser to download file) 4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are current) using): a) IS. / ISO* Yes 2017 b) ENRS* Yes 2017 c) ENRS* Yes 2017 c) Dept. Head (Any System) Date: Authorized Signatory Name: Designation: **Please send the duly filled Questionnaire to Bharat Seats Limited) For BSL office use only) BSL's EVALUATION & REMARKS: S. No. Name of Authority Dept. Head (Materials) Dept. Head (GA) Dept. Head (GA) Dept. Head (GA) Dept. Head (GRigg) Initial Approval: S. No. Name of Authority Signature Date Final Approval:			r product	Tracoability System is	n congrat choot):					
http://14.1415.02.1416.050.1416.050.1415.050.141	4.5 ITAGE	bility (Killuly defille you	product	Traceability System in	ii separat sileet).					
http://l.4.141.50.214.856data/Technical File/SMIR_FORMAT (1) F10010_11-03-2019_112702.xls_(**Copy and paste this link on web browser to download file) 4.7 Any Special Process/Facility: **Ves 4.8 Rejection Monitoring System: **No 4.9 Customer Satisfaction Index/Trend: **Ves 4.10 Give details of Inspection Procedures(Sampling Self-certification etc.): **http://l4.141.50.214.856data/Technical_File/SMIR_FORMAT (2) F10010_11-03-2019_112702.xls_(**Copy and paste this link on web browser to download file) 4.11 Exposure to National/International Standards: **Tick:** **Specify Nos.** (which you are current) **using):** **Using: **Usin	4 6 Desci	ribe the Reaction Plan fo	r Non-co	oforming products (At	tach senarate she	ot).				
4.7 Any Special Process/Facility: Yes 4.8 Rejection Monitoring System: No 4.9 Customer Satisfaction Index/Trend: Yes 4.10 Give details of Inspection Procedures(Sampling Self-certification etc.): http://14.141.50.2148.55data/Technical-File/SMIR FORMAT [2) F10010 11-03-2019 112702.xis ("Copy and paste this link on web browser to download file) 4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are currentl using): 10 ISU/ISO* Yes 2017 2017 2018 DENMS* Yes 2017 2018 Date: Authorized Signatory Name: Designation: Please send the duly filled Questionnaire to Bharat Seats Limited) For BSL office use only) BSL's EVALUATION & REMARKS: S. No. Name of Authority Remarks Signature Date Initial Approval: S. No. Name of Authority Signature Date Initial Approval: Final Approval:							rowser to	download file)		
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No 4.9 Customer Satisfaction Index/Trend: Yes 4.10 Give details of Inspection Procedures(Sampling Self-certification etc.): http://li.41.50.214.85/data/Technical_File/SMIR_FORMAT (2) F10010 11-03-2019 112702.xls ("Copy and paste this link on web browser to download file) 4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are currently using): a) IS / ISO*		tion Monitoring System								
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### Authorized Signatory ### Authorized Signatory ### Authorized Signatory ### Please send the duly filled Questionnaire to Bharat Seats Limited) ### SEVALUATION & REMARKS: S. No. Name of Authority Dept. Head (QA) 3. Dept. Head (QA) 3. Dept. Head (QA) 3. Sr. V. P. Iticli Specify Nos. (which you are current) using): #### Authorized Signature Date Date Designation: Please send the duly filled Questionnaire to Bharat Seats Limited)		onier oatistaction maex	i i Giiu.							
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4.11 Exposure to National/International Standards: Tick: Specify Nos. (which you are currently using): a) IS / ISO* Yes 2017 b) EN/BS* Yes d) DIN* Yes e) Any Others* Please send the duly filled Questionnaire to Bharat Seats Limited) For BSL office use only) BSL's EVALUATION & REMARKS: S. No. Name of Authority Remarks 1. Deptt. Head (Materials) 2. Deptt. Head (ClA) 3. Deptt. Head (ClA) 3. Deptt. Head (Clagg) Initial Approval: S. No. Name of Authority Signature Date Date Date Date Date Date Date Date Date Signature Date Date Date C. G. M. (Works) Signature Date		-				ste this link on web b	rowser to	download file)		
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a) IS / ISO*	4.11 EXP	osare to National/Intern	ational of				s. (whic	h you are currently		
b) EN/BS* Yes c) JIS(JASO* Yes d) DIN* Yes e) Any Others* Yes Date: Authorized Signatory Name: Designation: *Please send the duly filled Questionnaire to Bharat Seats Limited) For BSL office use only) BSL's EVALUATION & REMARKS: S. No. Name of Authority Remarks Signature Date 1. Deptt. Head (Materials) 2. Deptt. Head (QA) 3. Deptt. Head (Engg) Initial Approval: S. No. Name of Authority Signature Date 1. G. M. (Works) 2. V. P. (Fin.) 3. Sr. V. P.	a) IS / ISO*			Yes						
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Date: Name: Designation:	d) DIN*			Yes						
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Name: Designation: Please send the duly filled Questionnaire to Bharat Seats Limited) For BSL office use only BSL's EVALUATION & REMARKS:										
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Initial Approval: S. No.										
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S. No. Name of Authority Signature Date 1. G. M. (Works)	Initial An	nroval·								
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3. Sr. V. P. Final Approval:										
		·								
M. D. Date	Final App	proval:								
	M. D.				Date					