



S.C Tehnica de Automatizare Sibiu S.R.L.

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### EVALUATION QUESTIONNAIRE OF THE MANAGEMENT SYSTEM FOR SUPPLIERS

The collaboration between **Tehnica de Automatizare Sibiu** and your organization is very important for us, that is why we ask you kindly to fill out and return this questionnaire in order to evaluate and include your organization in our list of accepted suppliers.

#### IDENTIFICATION INFORMATION FOR SUPPLIER:

Name of organization: .....  
Adresse: .....  
Phone: ..... Fax : .....  
**Contact Person:**  
Name/Vorname: .....  
Function: .....  
Phone: ..... E-mail .....

#### ACTIVITY:

**Products/services provided:** .....  
.....

#### EVALUATION CRITERIAS:

1. Exists in your organization an established and certified management system:

Quality	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Environment	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Health and occupational safety	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Another system	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Expiration date of certificate / authorization: .....

**Please attach copies of certificates (authorizations/accreditations) owned.**

2. Do you agree with a second party audit by TAS SRL? YES ☐ NO ☐
3. Do you apply discounts and bonuses according to the quantity of products and services provided? YES ☐ NO ☐
4. The provision of products and services fall within the timeframe required by the client? YES ☐ NO ☐



5. Do you inform your client when the delivery of products and services is delayed?

YES ☐

NO ☐

6. Do you have proposals in order to improve the collaboration relationship between our companies?

YES ☐

NO ☐

If Yes , please let us know what they are

.....  
.....

**COMPLETED:**

**Name:** .....

**Function:** .....

**Date :** .....

**Signature:** .....

