

Supplier Self-Assessment

The
laboratory
at your side

 Labor Dr. Wisplinghoff

1. General

1.1	Name of company/legal form:				
1.2	Street/No.:				
1.3	ZIP code/Town/City:				
1.4	Country:				
1.5	Telephone:		1.6	Fax:	
1.7	Email:		1.8	Homepage:	
1.9	Year of foundation:		1.10	Number of employees:	
1.11	Employees working in Administration:		1.12	Employees working in Production/Service:	
1.13	Employees working in Quality Mgmt.:		1.14	Gross annual revenue:	
1.15	Revenue development in the past 3 years:		1.16	Last year's investment volume:	
1.17	Export rate:				
1.18	Expected share of revenues with Labor Dr. Wisplinghoff in total revenues:				
1.19	Do you have a business registration or permission to practice freelance profession?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

2. Company structure and shareholders

2.1	Corporate affiliation: (Name and address of parent company, if different)	
2.2	Information on owners/main shareholders/partners:	
2.3	Locations/subsidiaries (countries):	
2.4	Reference customers/projects:	
2.5	Please provide a corporate organizational chart.	

3. Contact information

		Name:	Telephone:	Fax:	Email:
3.1	Managing Director(s)				
3.2	Head of Sales				
3.3	Research & Development				
3.4	Logistics				
3.5	Service				
3.6	Procurement				
3.7	Quality Management				

4. Financial information

4.1	Bank name:	
4.2	IBAN:	
4.3	BIC:	

5. Tax information

5.1	Tax number	
5.2	VAT number (only in EU)	

6. General organization

6.1	Do you have a Service Department and/or service hotline?	<input type="checkbox"/> Yes, as follows: <input type="checkbox"/> No
6.2	Is worldwide delivery possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No With the following restrictions:
6.3	Do you have options for electronic data exchange?	<input type="checkbox"/> Yes, as follows: <input type="checkbox"/> No

7. What products and/or services does your company offer?

▪	▪
▪	▪
▪	▪

8. Production

Is your company assigned to the manufacturing sector? If no, please answer questions within 9.		
8.1	Do you have experience with development partnerships?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.2	Where are your products engineered?	<input type="checkbox"/> Internally <input type="checkbox"/> Externally
8.3	Is production carried out in-house?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.4	Do your products contain hazardous substances?	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Services

9.1	Is your company in possession of a valid temporary employment licence (Arbeitnehmerüberlassung)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.2	Do subcontractors carry out your provided services – in whole or partially?	<input type="checkbox"/> Yes <input type="checkbox"/> No

10. Quality Management and Certifications

10.1	Management Systems			
10.1.1	Do you have your own management system? If not, please answer the questions from 10.1.4 onwards.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.1.2	Has the management system been certified by an accredited institution (e.g. DAkkS)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.1.3	Certified standard	Valid certificate		Valid until:
	ISO 9001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 13485	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 14001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 15189	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 17020	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 17025	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 17043	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 27001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 37001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 45001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 50001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	DIN EN 15038	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	EN 1090	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	Others:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.1.4	Do you plan a certification?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	ISO 9001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
	ISO 14001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
	ISO 27001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
	ISO 37001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
	ISO 45001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
	ISO 50001	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
	Others:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:

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10.2	Quality Management		
10.2.1	Is there a standard-based, specified Quality Management System in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.2	Has a Quality Management Officer been appointed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.3	Is there a Quality Policy Guideline?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.4	Is there a QM Manual that is regularly updated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.5	Is your QM System regularly evaluated, e.g. through internal audits?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.6	Are contracts reviewed to ensure that all defined requirements can be met?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.7	Is there an established process to ensure that contract-specific changes/modifications are communicated to the appropriate people/departments/offices?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.8	Are there processes in place for dealing with non-conforming products/services?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.9	Are identified failures analyzed and corrective measures subsequently derived and documented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.10	Are the relevant standards/laws available and accessible?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.11	Do you regularly evaluate your suppliers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.2.12	Do Quality Assurance Agreements (QAA) exist with your main customers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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10.3	Risk Management	
10.3.1	Has a company-wide Risk Management System been established in your company?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.3.2	If yes, please explain its building blocks.	
10.3.3	Does your Enterprise Risk Management Program allow you to constantly monitor, prevent and reduce risks?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.3.4	Is a Supply Chain Risk Management Program in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.3.5	If yes, please explain its building blocks.	
10.3.6	What kinds of supplier, price and supply risks do you monitor?	
10.3.7	Please briefly explain your approach and the digital solution(s) used.	

10.4	Inspections/Tests (only to be completed by manufacturing companies)	
10.4.1	Are inspections/tests carried out and documented during development, design, production and before delivery?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.4.2	Is the traceability of delivered third-party/supplier products guaranteed (if necessary)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.4.3	Are the manufacturing and testing processes based on standardized procedures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.4.4	Are inspections/tests carried out during production and before the product is delivered to the customer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.4.5	Are the inspection/test results documented?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.4.6	Is the maintenance of all production facilities/equipment carried out according to a fixed schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.4.7	Is test equipment/devices checked regularly?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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10.5	Safety		
10.5.1	Do you carry out workplace-related risk assessments for your employees?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.5.2	How often are these updated?		
10.5.3	Are your employees instructed on workplace hazards?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.5.4	At what frequency does the instruction take place?		
10.5.5	Have your managers signed a written transfer of duties regarding responsibility for occupational health and safety?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.5.6	Please state the accident rate LTIF (Lost Time Injury Frequency) for the last three years.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.5.7	Has your company had a fatal accident at work or on the way to work in the last three years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.5.8	Are your employees instructed and trained in the handling of hazardous substances?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

10.6	Health		
10.6.1	Have you implemented a company Health Management Program?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.6.2	Please name individual Health Management measures.		
10.6.3	Do your employees have access to a company doctor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.6.4	Is it ensured that mandatory health checks are attended by employees?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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10.7	Environment	
10.7.1	Has there been an environmental incident in the last three years for which the public authorities were consulted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.7.2	Do you keep waste statistics categorized by type of waste?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.7.3	Do you keep a register of hazardous substances (Gefahrstoffkataster)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.7.4	Do you store your hazardous substances in accordance with the storage conditions specified in the safety data sheet (Sicherheitsdatenblatt SDS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.7.5	Please quantify your water consumption from the last three years?	
10.7.6	Do you comply with applicable laws and regulations regarding air emissions, noise pollution, soil and water discharges?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.7.7	Is it guaranteed that any waste generated by the supplier can be properly disposed of?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.7.8	When delivering hazardous substances, is it ensured that they are transported properly (cargo safety) and declared in accordance with regulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

10.8	Energy	
10.8.1	Do you monitor your energy consumption?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.8.2	How high has your energy consumption been in the last three years?	
10.8.3	Do you use electricity from sustainable energy resources?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.8.4	If yes, what is the proportion?	
10.8.5	Do you have an energy reduction program or targets?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.8.6	Is the energy efficiency of your products reported (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

10.9	Sustainability	
10.9.1	Do you have a sustainability strategy in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.9.2	Do you conduct life-cycle-assessments for your products?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.9.3	Do you calculate the CO2 footprint for your operating sites?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.9.4	Do you calculate the CO2 footprint for your products?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.9.5	Do you submit the abovementioned CO2 footprints for the products/services you supply to us?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.9.6	If you have already participated in sustainability ratings (e.g. EcoVadis), please provide us with your score.	
10.9.7	Is attention paid to environmentally friendly packaging, take-back options, etc. during transport?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.9.8	Is there an established process that ensures that specific substitution options (e.g. higher energy efficiency, lower hazardousness) of supplied products or substances are forwarded to the responsible departments of Labor Dr. Wisplinghoff?	
10.9.9	Percentage of recycled input materials used to manufacture the own primary products and services:	
10.9.10	Materials (in kg or distribution) for packaging, storage containers and load carriers made of:	
	▪ Wood (Holz):	
	▪ Corrugated paper and cardboard (Wellpapier/-pappe):	
▪ Paper, carton and cardboard (Papier, Karton, Pappe):		

10.10		German Supply Chain Act (LkSG) & Whistleblower Protection (HinSchG)	
10.10.1	Does your company fall within the scope of the law on due diligence in the supply chain (LkSG) and are you obliged to fulfil the requirements (Sorgfaltspflichten)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.10.2	Have you started to implement the due diligence obligations (Sorgfaltspflichten) in your area of responsibility and with your suppliers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.10.3	If not, please give reasons.		
10.10.4	Has your company already developed and implemented a Human Rights Strategy (Menschenrechtsstrategie)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.10.5	Do you have an own code of conduct, or have you signed/agreed one with your business partners?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.10.6	Has a publicly accessible Complaints Management System/whistleblower hotline been set up and is it active (e.g. on the homepage)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.10.7	Has the Whistleblower Protection Act (HinSchG) been considered when designing the procedure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.10.8	Do you adhere the United Nations Universal Declaration of Human Rights and the International Labour Organization (ILO) Declaration on Fundamental Principles and Rights at Work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

11. Social Responsibility and Compliance

11.1	Do you have your own code of conduct in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.2	Do you have a Compliance Management System in accordance with IDW PS 980 or ISO 19600 in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.3	Do you comply with local minimum wage laws and other local labour legislation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.4	Do you monitor and control your suppliers' compliance with legal minimum wage laws and other mandatory labour regulations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.5	Do you have a policy against child labour and forced labour in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.6	Do you have an anti-corruption, anti-bribery and anti-money laundering policy in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

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11.7	Do you conduct audits or reviews of your supply chain in relation to social standards?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.8	Do you have business, transactions, suppliers or business partners in countries or with companies/ individuals that are subject to a trade restriction list (i.e. US, UN or EU restriction list)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.9	Do you produce or trade in dual-use goods or goods that are listed in the EC Dual-Use Regulation or the US Commerce Control List (CCL) and/or Export Commodity Classification Number (ECCN)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.10	Do your products contain conflict minerals? <ul style="list-style-type: none"> ▪ <input type="checkbox"/> Cassiterite (Tin) ▪ <input type="checkbox"/> Coltan (Tantalum) ▪ <input type="checkbox"/> Wolframite (Tungsten) ▪ <input type="checkbox"/> Gold ore (Aurum) 	If yes, please send us the completed questionnaire: https://www.responsiblemineralsinitiative.org/reporting-templates/emrt/
11.11	What kind of system do you have in place to ensure data protection and information security?	
11.12	What technical and organisational measures has your company taken to comply with the provisions of the GDPR (DSGVO)?	
11.13	Are you compliant with the General Data Protection Regulation and has a Data Protection Officer been appointed in your company?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.14	Are you (or a company in your group) the subject of an ongoing investigation by the authorities in one or more jurisdictions?	<input type="checkbox"/> Yes <input type="checkbox"/> No

12. Product and producer liability

(to be completed by manufacturing companies only)

12.1	Object insured:	
12.2	Insured sum:	
12.3	Deductible or excess:	

13. European Chemicals Directive 1907/2006 – REACH

13.1	Is your company within the meaning of REACH ...?	<input type="checkbox"/> Producer <input type="checkbox"/> End User	<input type="checkbox"/> Retailer <input type="checkbox"/> Importer <input type="checkbox"/> not affected
13.2	Have all substances/preparations supplied to Labor Dr. Wisplinghoff that require registration been preregistered by you or an upstream actor in your supply chain?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no: Please enclose a list of substances/preparations incl. scope of application.
13.3	Do your products contain substances on the candidate list (ECHA)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Please enclose a detailed list.
13.4	We confirm that we will carry out an unsolicited review whenever the candidate list is extended and report any changes to Labor Dr. Wisplinghoff.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

We accept audits by Labor Dr. Wisplinghoff or by authorized auditors: Yes No

Remarks:

Questionnaire completed by: _____
Name in capital letters
Function

_____ Date (DD/MM/YYYY) _____ Signature/stamp

Please send the completed form and attachments to: einkauf@wisplinghoff.de

To be filled in by Labor Dr. Wisplinghoff				
Classification	<input type="checkbox"/> qualified (preferred)	<input type="checkbox"/> qualified	<input type="checkbox"/> qualified (with restrictions)	<input type="checkbox"/> not qualified
Quality-relevant supplier or service provider?	<input type="checkbox"/> Yes <input type="checkbox"/> No	QAA or other agreements/ contracts needed?	<input type="checkbox"/> Yes, as follows: <input type="checkbox"/> No	
Agreed to Supplier Code of Conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks		
Final approval	<input type="checkbox"/> approved		<input type="checkbox"/> not approved Reason:	
Date	Signature Purchasing		Signature Quality Management	