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| **SUPPLIER EVALUATION FORM** |
| SUPPLIER CODE : | DATE : |
| NAME OF SUPPLIER : |  |
| Constitution : Propreitor / Partnership / Pvt Ltd / Ltd co. |  |
| ADDRESS : |  |
|  |  |
|  |
| CONTACT PERSON : |  |
| TEL : | Mobile : | e-mail : |
| NATURE OF BUSINESS :  | **MANUFACTURER / TRADER / SERVICE / LABOUR JOB** |
| System Certification : | YES / NO If yes, ISO 9001 / TS 16949 / NABL / CE Marking  |
|  |  (Please attach copy of certificate) |
|  | Certifying body : |
|  | Certificate No : Validity |
| PRODUCT / SERVICE SUPPLIED : |  |
| DATE OF ESTABLISHMENT : |  |
| DELIVERY LEAD TIME : |  |
| PAYMENT TERMS : |  |
| PAN No |  |
| COMMERCIAL REGISTRATION (VAT, CST, ST, SERVICE TAX etc) |  |
| LEGAL COMPLAINCE |  |
| 1. Factory License No & Validity \* |  |
| 2. MSME No \* |  |
| 3. Pollution Control board consent No and Validity \* |  |
| 4. Manufacturing License No (for chemical manufacturers) \* |  |
| Government registration, if any |  |
| Sample submission date  |  |
| Signature of supplier with company seal : |
| * Attach copy of license or certificate
 |
| * ***Note : The filled in form to be mailed to info@shreejimail.com . We will get back to you.***
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|  **Page : 3****SUPPLIER EVALUATION FORM** |
| Supplier is **approved / not approved**. |
| Date : DH (COM) : |
| **Note :** |
| 1. Minimum criteria for selection is **70 marks (for evaluation as per criteria C)**. |
| 2. Suppliers are re-evaluated in every April. |