

HINDUSTAN FLUOROCARBONS LIMITED

VENDOR REGISTRATION FORM

- € **Vendor's name** :
- € **Type of Concern** : **Proprietary/Partnership/Pvt.Ltd./Ltd.**
- € **Address(Office)** :
- € **Address(Works)** :
- € **Contact Person &Designation** :
- € **Telephone/Fax Nos** :
- € **Mobile Nos** :
- € **E-mail Address** :
- € **Business Activities** : () **Trading** () **Manufacturing** () **Services**
- € **No. Of Employees** : **Technical** () **Non-Technical** ()
- € **Year of Commencement** :
- € **VAT/TIN No** :
- € **C.S.T No** :

€ E.D. Tarrif No :

€ SSI Regn. No :

€ Turnover of during last 3 Years :

€ Do you hold ISO 9000/14000 Certificate :

€ Business with us during Last Year :

€ Range of Products/Services Offered :

€ Details of the activies carried out by the Vender :

VENDOR ASSESSMENT FORM

Major Customers.

(Please,enclose copies of few major PO's

Executed during last 2-3 years for

Corporate big companies)

Particulars of Plant & Mechinery

Details of Quality Control Department

€ Is regular calibration of all instruments done : ()Yes ()No

€ Do you have quality control Laboratory : ()Yes ()No

€ Major Testing Instruments Available :

Information Furnished By

Name:

Designation:

Date:

Place:

Signature with company Seal.

INTERNAL USE ONLY

Status of Supplier: ()New ()Established

If new supplier/new products,type of Assessment Status :

*** ()By Visit ()By Registration Form Details**

()By Placing Trail Orders ()Based on Past Experience

REMARKS OF THE ASSESSMENT AUTHORITY

Assessment Status : ()APPROVED ()REJECTED

Signature of Authorised Person

***Assessment should be done by the committee nominated by the management and should enclose their report.**