|  |
| --- |
| *Please complete this form to the best of your ability for the specified product(s) listed.* |

**Section I**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **COMPANY** | Company Name: | | | | | | Division: | | | |
| Street Address: | | | | | | City: | | | |
| Region/State: | | | | Postal Code: | | | | Country: | |
|  |  | |  | | | |  | |  | |
| **PRODUCT** | Trade Name:  Infineum Designation: | | | | | | | | | |
|  |  | |  | | | |  | |  | |
| **MfG**  **LOCATION** | Company Name: | | | | | | Division: | | | |
| Street Address: | | | | | | City: | | | |
| Region/State: | | | | Postal Code: | | | | Country: | |
|  |  | |  | | | |  | |  | |
| **CONTACTS** | Customer Service Rep. | | Name**:      ,** Title | | | | Phone: | | | Email: |
| Emergency Hazard/Spills | | Name**:      ,** Title | | | | Phone: | | | Email: |
| Supply - Off Hours | | Name**:      ,** Title | | | | Phone: | | | Email: |
|  | |  | |  | |  |  | | | |
| **ISO**  **CERTIFICATION** | | Certification Body: | |  | |  | Provide details of any other quality system approvals held: | | | |
| Certification Body is accredited by IAFMLA (International Accreditation Forum Multilateral Recognition Arrangement) – Yes/No | | YES  NO | |  |  | | | |
| Accreditation meets ISO/IEC 17021 for supply of materials from your manufacturing site – Yes/No | | YES  NO | |  |
| Scope of Registration: | |  | |  |
| Certification Number: | |  | |
| Expiration date for current certificate | |  | |
|  | |  | |  | |  |  | | | |
| **DOCUMENTS** | | Provide Copies of the following: | | | * ISO CERTIFICATION(S) * (M)SDS * OTHER: | | | | | |
| Have you reviewed the Infineum Supplier Code of Conduct?  The Infineum Supplier Code of Conduct can be found on the Infineum Supplier Portal <https://www.infineum.com/en-gb/infineum-supplier-portal/>  YES  NO | | | | | | | | |
|  | |  | |  | |  |  | | | |
| **PREPARED**  **BY** | | Name**:      ,** Title | | | Date**:** | | | Email**:** | | |
|  | | |  | | | | | | | |
| MC900411244[1] | | | If your manufacturing location is ISO Certified, the form is complete.  If your manufacturing location is **NOT** ISO Certified, complete Section II below 🡻 | | | | | | | |

**Section II**

If your manufacturing location is *not* ISO Certified please complete following section.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOT REGISTERED TO ISO 9000 OR EQUIVALENT** | Do you intend to seek ISO 9000?  YES  NO | If Yes, provide the following:   * Anticipated Registration Date: * Current Status: | | | | * Scope Of Registration: * Certification Body: | | |
| QUALITY SYSTEM | | Y/N | | INSPECTION AND TEST | | | Y/N |
| Does your company have a formal quality system? | |  | | Are inspections procedures documented? | | |  |
| Is there a comprehensive Q.A. Manual? | |  | | Do the inspection procedures define acceptance/rejection criteria? | | |  |
| Is your system periodically and systematically reviewed? | |  | | Do the inspection procedures identify the equipment to be used? | | |  |
| Would you object to a representative of Infineum conducting a Quality Assessment at your premises? | |  | | Are records of inspections retained?  If yes, for how long? | | |  |
| ORGANIZATION | |  | | INSPECTION EQUIPMENT | | |  |
| Would you object to a representative of Infineum conducting a Quality Assessment at your premises? | |  | | Are instruments and test equipment calibrated? | | |  |
| Do you have a Quality Control Department? | |  | | Is there a calibration schedule? | | |  |
| PROCUREMENT | |  | | CORRECTIVE ACTION | | |  |
| Do you have a vendor assessment system? | |  | | Is there a formal system of corrective action for: | | |  |
| Are vendors rated and periodically reassessed? | |  | | a) Receipt of nonconforming materials? | | |  |
| Do procurement documents clearly define specific requirements? | |  | | b) Intermediate production? | | |  |
| Are goods received inspected and the results recorded? | |  | | c) Finished production? | | |  |
| Are inspected materials identified as such? | |  | | Is there continuing analysis of the causes of nonconformity? | | |  |
| Are uninspected or rejected goods segregated? | |  | | Are checks made to ensure corrective actions are implemented and effective? | | |  |
| Is there a documented system for rejects? | |  | |  | | |  |
| FINAL INSPECTION | |  | | INSPECTION STATUS | | |  |
| Are all finished products tested against the agreed specification prior to dispatch? | |  | | Is the inspection status apparent at all stages of manufacture? | | |  |
| Are product specifications in agreement with Infineum for products supplied? | |  | | Is batch identity maintained throughout all stages, and can you trace material from receipt to dispatch? | | |  |
| Can certificates of analysis be supplied when requested? | |  | | Are concessions for deviations from specifications sought from the customer prior to dispatch, and are these concessions recorded? | | |  |
| HANDLING, STORAGE, AND DISPATCH | |  | | TRAINING | | |  |
| Are there documented procedures for handling, storage and dispatch? | |  | | Have your company personnel received adequate training to perform their assigned tasks? | | |  |
| Are these procedures adequate to prevent damage and deterioration of stock? | |  | | Do you maintain training records? | | |  |
| CONTROL OF NONCONFORMANCE | |  | | SPC TECHNIQUES | | |  |
| Are there procedures to identify, segregate, and dispose of nonconforming material? | |  | | Do you utilize statistical techniques to monitor and maintain product quality? | | |  |
| Please attach any other information that will help us make a proper assessment of your Quality System. | | | | | | | | |
| **PREPARED BY:** Name**:      ,** Title | | | | Date**:** | | | Email**:** | |