

SUPPLIER GENERAL INFORMATION AND EVALUATION

In order to become or maintain an active supplier status at Landoll Company, LLC, the following information is required upon request for our records. Please fill out this form completely and return to Landoll Company, LLC via fax (785) 562-4854 or email it to: kenny.lee@landoll.com. This form can be filled out using Adobe Reader 7.0 or higher.

Company Name						
Physical Address Address			Remit To Address Address			
				StateZip		
ales Contact Customer Serv		ner Service		Accounts Receivable		
Name	Name			Name		
Tel:	Tel:			Tel:		
Fax:	Fax:			Fax:		
Email:	Email:			Email:		
Quality Control Contact Name Tel:		nty/Service Co		Please indicate how you wish to receive purchase orders and other reports from Landoll Company, LLC and note correct Email or Fax Information below. □ Email □ Fax		
Fax:	Fax:			Email		
Email:	Email:			Fax		
Payment Terms			FOB Point			
Are Blanket Orders accepted?	□Yes □	□No	Will you stock	x inventory? □Y	'es □No	
Do you have annual shutdowns?	□Yes □	□No	If your company has a scheduled shutdown notification must be received prior based on product lead time for planning purposes.			
D & B Rated	□Yes □	□No	D & B Numbe	r		
Type of Business: □Large	□Smal	II □Oth	er (Minority, F	emale, Disabled O	wnership, etc.)	

Present number of employees:	Total Direct Labor: Total Engineering: Total Quality: Other:									
Supplier Self Survey										
Does your company:										
Have a Quality Manual?	□Yes	□No	□N/A							
Have an Internal Audit System	□Yes	□No	□N/A							
Have an Approved Supplier Lis	□Yes	□No	□N/A							
Have an Equipment Calibration	□Yes	□No	□N/A							
Have a system for Controlling Tracking Corrective Action?	□Yes	□No	□N/A							
Use defined Quality Plans or N	□Yes	□No	□N/A							
Utilize a formal Planning System for Manufacturing and Procurement?			□No	□N/A						
Agree to meet All Technical Documentation requirements?			□No	□N/A						
Could your company:										
Provide Certificate of Conformity for product, if requested?			□No	□N/A						
Provide a copy of your Quality Manual, if requested?			□No	□N/A						
Provide access to your site to perform an Audit?			□No	□N/A						
Provide Proof of Insurance cov stocked for Landoll Company,	□Yes	□No	□N/A							
By signing and submitting this for you have agreed to Landoll Company, LLC General Terms of Delivery or have submitted amendments that have been accepted by Landoll Company, LLC. Please remember to submit any other required information i.e., Declaration of Confidentiality, General Terms of Delivery and Terms of Warranty Statement with this form.										
Signature	Print Name									