

SUPPLIER PROFILE FORM - CHECKLIST FOR DESIGN STUDIOS

**NAME / TYPE
OF COMPANY:**.....

ADDRESS:.....

.....

.....

PHONE:.....**MOBILE:**.....
.....

E:MAIL:.....**HOME- PAGE:**.....

COMPANY, FIRST ESTABLISHED IN:

OWNER(S):.....SINCE:.....

BANK USED:

BANK ACC.

NO./CODE:.....

TURNOVER -

LAST 2 YEARS:.....

DIR./MANAGER:.....

PERSON RESPONSIBLE

FOR CREATIVE WORK:.....

CONTACT PERSON(S)

FOR CLIENT /ORGANISATION:.....

NO. Of FULL-TIME EMPLOYEES:.....APPROX. SIZE (SQM):.....

NORMAL WORKING HOURS:.....SHIFTWORK:.....

MAIN EQUIPMENT:

(Indicate name/type, year/age, max. size etc. and condition 10=best/1=worst)

.....

.....

.....

.....

.....

SOFTWARE USED (Versions?):

.....

.....

.....

.....

.....

MAIN PRINTING COMPANIES USED (%?):

.....

.....

.....

CONTRACTS WITH?.....

.....

OTHER EQUIPMENT / SPECIALITIES:

.....

.....

.....

GENERAL INFORMATION:

QUALITY CONTROL (QC)

/ MEASUREMENTS USED?:.....

.....

.....

NAME OF PERSON(S)

IN CHARGE OF QC:.....

.....

MAIN WORKLOAD /

MAIN CUSTOMERS:.....

.....

.....

.....

SUB-CONTRACTING?

(State what and to whom):.....

.....

.....

CONTRACTS WITH?:.....

.....

ADDITIONAL SERVICES WHICH CAN BE PROVIDED?

.....

.....

(e.g. Historical data, business links, mother company, branches, investment plans etc.)

[illegible]