

IMPORTANT!
Please download this form first,
save it on your computer and
only then fill in and send!



KESSEBÖHMER

[Please read our privacy statement](#)

Become a Kesseböhmer supplier!

The first step to becoming a Kesseböhmer supplier is to fill out and send us this form. We will then get in touch with you.

(Fields marked * are obligatory and must be filled out.)

1. General information

| | | | |
|------------------------|----------------------|--------------------------------|----------------------|
| Company name: * | <input type="text"/> | D-U-N-S number * | <input type="text"/> |
| Legal form * | <input type="text"/> | Group to which company belongs | <input type="text"/> |
| Address line 1 * | <input type="text"/> | Address line 2 | <input type="text"/> |
| Postcode/Town * | <input type="text"/> | Postcode/Town 2 | <input type="text"/> |
| Country * | <input type="text"/> | Country | <input type="text"/> |
| Contact partner | | | |
| Title * | <input type="text"/> | Tel. (switchboard) | <input type="text"/> |
| Title | <input type="text"/> | Fax (central) | <input type="text"/> |
| First name | <input type="text"/> | Email (central) | <input type="text"/> |
| Last name * | <input type="text"/> | Website http:// | <input type="text"/> |
| Position * | <input type="text"/> | | |
| Tel. * | <input type="text"/> | | |
| Email * | <input type="text"/> | | |

2. Tell us about your company

Year it was founded *

| | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Number of employees | in production | in administration | Sales in EUR | year before last | last year | current year |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Select one or more of these categories to describe your company*:

Manufacturer
 Dealer
 Parts supplier
 System supplier

3. Tell us about your products

| | | |
|---|--|---|
| 601 Metal pipe <input type="text"/> | 602 Wire <input type="text"/> | 603 Sheet metal <input type="text"/> |
| 604 Strip steel <input type="text"/> | 605 Metal profiles <input type="text"/> | 607 Turned/milled/cold formed metal parts <input type="text"/> |
| 608 Die casting <input type="text"/> | 609 Surface finishes <input type="text"/> | 610 Plastics <input type="text"/> |
| 611 Wood <input type="text"/> | 612 Glass <input type="text"/> | 613 Electrical systems <input type="text"/> |
| 614 Fittings <input type="text"/> | 616 Contract manufacturing <input type="text"/> | 617 Connectors <input type="text"/> |
| 618 Drive mechanisms <input type="text"/> | 619 Bought-in mechanical parts <input type="text"/> | 620 Packaging <input type="text"/> |
| 621 Printing + office <input type="text"/> | 622 Other <input type="text"/> | 999 HR services <input type="text"/> |

More information:

4. Tell us about your customer base

Please select one or more of the following customer categories*:

Automotive
 Furniture
 Telecommunications
 Energy
 Sanitary
 Defence
 Household
 Medical
 Agriculture
 Other

References · Please list your references and attach PDF copies in a zipped file.



KESSEBÖHMER

5. Your Quality Management System

Is your business certified?* Yes, to ISO 9001 Yes, to IATF 16949 No, not yet

Zertifikate · Please send us your certificates as PDF files in a ZIP folder.

Is your business not yet certified? ←

If it isn't certified, please answer the following questions (indicate with a cross if yes, otherwise leave empty):

Does your company intend to introduce and certify a QM systems? Yes

If so, when?

Do you carry out supplier evaluations? Yes

Do you carry out incoming goods inspections? Yes

Do you keep defect statistics? Yes

Do you have a system for ensuring the traceability of your products? Yes

Do you carry out a final inspection of your products before despatch? Yes

Would you agree to a quality audit being carried out at your company by our personnel? Yes

Additional quality assurance measures:

(e.g. FMEA, CIP, APQP, PPAP, SPC, Capability Reports, VDA Approval Report, CAQ, other)

Name of person to contact in the event of complaints:

Name of PSO/PSCR:

6. Additional certification

ISO 14001 (international environment management standard) Yes No Scheduled for

ISO 50001 (energy management) Yes No Scheduled for

ISO 45001 (occupational health and safety) Yes No Scheduled for

Yes, other (enter details):

7. Sustainability

Are you already in a position to calculate the carbon footprint of your products? Yes No Scheduled for

Does your company have decarbonisation targets? Yes No Scheduled for

8. Tell us about your product design and development

Does your company have a design and development department? Yes

Do you use a CAD system?

Pro Engineer AutoCad Solid Works Unigraphics Inventor

Catia V4 + V5 Master CAM Other

List any other systems you use:

9. Tell us about your communication, data exchange and interface options

Can you print barcodes on shipping documents? Yes

How do you transmit/receive CAD data

DXF STEP IGES Other

How do you transmit/receive order data?

EDI Web-EDI Other

I have read the privacy statement . *

Submit