Supplier Intake Form



General Information				
Legal Name	Compar	ny Website		
Registered Address	CoC Rec	gistration No		
	No of Er	nployees		
	Annual ⁻	Turnover		
	VAT no.			

Define the commodities and services offered to Nedstack:					
Contact	Details				
Share your cor	ntact details as re	levant for the comr	nodities and services ι	under	
	Name	Position	Phone Number	Email	
Sales					
Quailty					
Invoicing					
Expedition					
Support					
	ment Syste				

Share your management system information as applicable and self asses any relevant risk in contributing to our supply chain Applicable Standard Audited by Certificate ID Expiration QMS EMS OHAS Management system Other Other

Supplier Intake Form



Self-Assessment of Risk related to delivering the proposed commodity /service						
	-					
Clients & Refe		commodity/service propose	ed			
Company Name	Country	Products/Service supplied				
Signatura						
Signature Please sign the Suppli	er intake form					
Name						
Job title						
Date						
Signature						