



Preferred Supplier Evaluation Questionnaire

STEP ONE & TWO: Please complete & return by POST, along with any relevant literature to:

Procurement Department
Route Marketing Ltd
The Centre
Unit 8 Building 2
Sandwich Industrial Estate
Sandwich
Kent
CT13 9LY

Please note that any applications received by Email or FAX will be automatically rejected

PLEASE DO NOT COMPLETE THIS QUESTIONNAIRE IF YOU TRADE AS ANY OF THE FOLLOWING, AS WE WILL NOT BE ABLE TO PROCESS YOUR APPLICATION:

Web Design; Print; Graphic Design; Marketing Consultants; Telemarketing; E-Marketing; Data List Providers; Virtual/Serviced Offices

Section 1- General

1.1 Could you please complete the following to enable us to evaluate your information.

Company Name:	
Address:	
Telephone No.	Fax No.
E-mail:	Web Site:
Representative Contact Name:	Accounts Contact Name:
Number of Active Directors:	Number of Full Time Staff:

are you looking to provide servi Route Marketing Ltd The Centre	ices for (Please tick any that apply)	
_		
he Centre		
Route Marketing Ltd Clients		
he Centre clients		
re you a 'Trade Only' Supplier?	,	YES/NO
Vould you be available for a fac	ce to face meeting at one of our sites if necessary?	YES/NO
low long have you been trading	g?	
	Years Months	
re you VAT Registered?		YES/NO
'AT Reg. Number		
verage Annual Turnover?	£	
Vhat is your company status?	Sole Trader / Partnership Private Limited Company Public Limited Company Limited Liability Guarantee Company	
Company Number		

1.10 Which of the following regions do you supply? Please tick all that apply

All South	All West	All of East	All of Midlands
<u>East</u>	<u>Country</u>	<u>Regions</u>	
Kent	Gloucestershire	Essex	Worcestershire
East Sussex	Wiltshire	Hertfordshire	Warwickshire
West Sussex	Dorset	Bedfordshire	Northamptonshire
Hampshire	Somerset	Cambridgeshire	West Midlands
Surrey	Devon	Rutland	Leicestershire
Berkshire	Cornwall	Suffolk	Staffordshire
Oxfordshire		Norfolk	Nottinghamshire
Buckinghamshire		Lincolnshire	Derbyshire

<u>All North</u>	<u>All North</u>	All Scotland	All Wales
<u>East</u>	<u>West</u>		
Cleveland	Cheshire	If not Please specify	If not please specify
Durham	Mersey		
Tyne N Wear	G. Manchester		
Northumberland	Lancashire		
	Cumbria		

Section 2. - Quality Management

2.1	Do you have an externally recognised Quality Management System? If you have answered yes, please give details	YES/NO
	If you do NOT hold a current certificate please answer the following:	
1.	Do you intend to gain ISO or other certification?	YES/NO
2.	Do you have a Quality Management Manual?	YES/NO
3.	Do you have documented procedures?	YES/NO
4.	Do you have a documented system of control for dealing with customer complaints, return of products/rejects?	YES/NO
5.	Do employees have the necessary qualifications to carry	. 23/
<i>J</i> .	out the service you supply?	YES/NO
Section :	3 Health & Safety	
3.1	Do you have a Health & Safety policy in place?	YES/NO
3.2	In the last 3 years have you had prohibition notice issued against you?	YES/NO
	If you have answered yes to questions 3.2 we may request further details	

Section 4. - Environment

	Do you have Environment Policy? We may request further details	YES/NO
2	If you have answered No, what procedures/ policies do you have in place to reduce you the Environment?	r impact on
rtion	a.c. Any Other information	
.tioi	15 Any Other information If you would like to provide any other information that you feel would be helpful, please box below:	e do so in the
the	ere any other aspects of the business you are looking to grow?	
	Would you be able to take that on without increasing your fixed costs? Yes/No	
	What amount of extra work could you take on with your current spare capacity?	,

Section 6. - Declaration

The information supplied is correct and the most current.

company. Signed: Name: Position: Date: I consent to receive emails, mail and telephone calls about your products and services. STEP THREE: When are you free to discuss becoming a Preferred Supplier further? As the business we are looking to arrange could be considerable and ongoing we require the contact to be with company directors or decision makers; It will take roughly 30-45 minutes for our Procurement Partnership to explain the process in detail. Please provide us with a date and time at which your decision maker would be available to receive a 1-2-1 presentation from our Procurement Partnership. Please ensure you have access to the internet as you are required to view their screen. I consent to the information I have supplied to be passed to your third party provider: Please refer to our privacy policy which can be found on our website contact page. Contact Name: Telephone Number: Email: Iob Title: Date and Time:

I/We will notify you BY POST of amendments to this information or change in the circumstance of the

Note: We will confirm your appointment time and date with the Procurement Partner