		Request for Quotation No.:		
Company Inform	ation	Company Contacts		
Full name company	:	Contact person		
Address	:	Director level		
		QA representative		
Telephone No.	:			
Telefax No.	:			
1.0 List Commodities, e.g. Pressure Vessels, Internals, Compressors, etc.				

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2.0 Previous Company Order

List details of purchase order/or subcontracts awarded by Companies (Worldwide) to your Company in the last three years.

Company	Commodity	State Purchase Order		
. ,	,	Date	Number	Value

RB25022.doc www.red-bag.com Page 2 of 4

3.0 Quality Management Systems	Ye No s
ISO 9001	
ISO 9002	
ISO 9003	
Others:	
Accreditation obtained:	attach copy of certificate
Certificate valid until:	
Certifying body:	
CE Marking:	
Acceptance/code stamp etc. by external bodies:	
Type of approval code stamp:	ополитично
Attach letters/certificates etc.:	
4.0 We will use the Quality System as p this project.5.0 Subsuppliers for this Request of Quality System as p	er item 3.0 for the Purchase Orders for Ye No s
Material/Services	Supplier/Subcontractor Certified

RB25022.doc www.red-bag.com Page 3 of 4

6.0	Other Information		
	Please state below any Company	other particulars not covered b	y this Questionnaire but which may assist

NB)	If insufficient space has be Questionnaire.	een allocated to any of the sec	tions, please attach further information to this
Comple	eted by (print full name):		
Compo	ny Designation		
Сопра	ny besignation		
Signatu	ire :		
Date		:	
		For Internal Us	e Only
Doviou	und by		
Reviev	vea by	Signed	Date
File R	eference No.:		

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