

APPROVED SUPPLIER RENEWAL QUESTIONNAIRE

PART 1 – Supplier Information											
Legal Business Name											
(Full):											
Parent Company:											
Registered Address:						City:				State:	
Country:								Zip Code:			
Website:											
CAGE/Vendor Code(s):											
Trade License Number:											
VAT Registration (Mandatory for U.A.E VAT registered Company)											
PART 2 – Significant Changes to the Organization – (if no significant Changes, please mention "None")											
Please mention in detail, if there are any significant changes to the organisation. These may include: • Management • Facility/Location • Scope of Work											
PART 3 – Certifications and Approvals											
Please det the approv capability I copies of c approvals, capability I	als, certing ist and a current reconstruction controls.	fications, ttach egulatory									
PART 4 – Supplier Statement											
Name of Person: (Submitting this form)								[Date :		
Email Address:							ontact umber:	•		-	

Notice: A hard copy of this document may not be the document currently in effect. The current version is always on the AMMROC network. Parent Document: SCM 200-009 Form No: SCM 400-014A Revision No: 00 / Dated: 24 Nov 2020

Issue No: 00

Form Retention Schedule: 3 yrs_ Page 1 of 2



SUPPLIER QUALITY QUESTIONNAIRE

NOTE:

- Please ensure this form is correctly completed, and, supporting documentation is forwarded together with this form
- This form can be completed without the need for printing
- When completed "Save" and "Send" all relevant documents to AMMROC email ID: supplierprofile@ammroc.ae

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Form No: QMS 400-019B

Revision No: 03 / Dated: 17 Jun 2019

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