

5. Data about the organizational structure in connection with the implementation of the instrument:

Employees _____, of which
development / design _____,
in production _____,
in service activities _____,
in inspections and tests _____,
in the quality management system _____.

6. Data and feedback about manufacturing system:

a) the production location (name and address):

b) appreciation regarding the complexity of the manufacturing process:

very little

small

average

high

very high

c) the process of making a product:

in one day

1 - 10 days

11 - 30 days

over a month

d) list and main characteristics of special and specific equipment used for manufacturing:

e) relevant information for monitoring the manufacturing process:

7. Data and feedback about the quality management system:

the manufacturer has implemented a quality management system (QMS):

the manufacturer has a non-certified QMS implemented:

manufacturer applies a certificate QMS.

a. the number, date and term of validity of certificate

b. certifying body

Contact person responsible for completing the questionnaire:

Name and surname: _____.

Function: _____.

Phone / fax / phone / e-mail: _____.

Date of completing questionnaire : _____.

Signature : _____.