

Supplier Self-Assessment

Ladies and Gentlemen,

Please find enclosed a supplier self-assessment form that we would ask you to complete and return to us along with the corresponding documents so we can create a vendor account for you.

Please note that you need to complete the pages on „Insurance“ and „Security Declaration“ as well. We would appreciate it if you could return all required documents, copies and other files to us within the next ten days

What we need from you:

- Completed Supplier Self-Assessment
- Completed insurance certificate
- Security declaration
- Certificates
- Completed Supplier Self-Assessment „current situation“

PLEASE NOTE:

You are expected to comply with our Conditions of Purchase!

Kind regards,

Your Purchasing Team

INSURANCE

Information on current insurance coverage
 General manufacturer's and product liability insurance including recall insurance

Name and address of the insurance holder/supplier

Name and address of the liability insurance company

Insurance number

Insurance cover for	sum covered	deductible amount	scope
Personal injury			
Material damage			
Financial loss			
Product liability damages			
Recall costs			

Are the following cost items covered?

- Third-party costs for the combination, blending or processing of the products supplied? Yes No
- Third-party costs for further processing or treatment? Yes No
- Costs for installation or removal? Yes No
- Coverage for:

Rail	Yes	No	Sub limit (amount insured) _____
Watercraft	Yes	No	Sub limit (amount insured) _____
Motor vehicles	Yes	No	Sub limit (amount insured) _____
Aircraft	Yes	No	Sub limit (amount insured) _____
- Assembly and maintenance works (if this service is rendered to the Würth Group) Yes No
- Non-product-related services (if these services are rendered to the Würth Group)

7. Is your company a distributor or manufacturer of the products supplied to us? Manufacturer Distributor
 Please enclose the corresponding proof of insurance from your liability insurance company that covers all the above details.

Date/Place
Name/Position
Company stamp/Signature

SUPPLIER SELF-ASSESSMENT



SECURITY DECLARATION

for Authorized Economic Operators

Name (company) _____

Street _____

Postal code/town _____

Country _____

Phone _____

Email _____

I hereby declare that:

- goods, which are produced, stored, forwarded or carried by order of Authorized Economic Operators (AEO), which are delivered to AEO or which are taken for delivery from AEO
 - are produced, stored, prepared and loaded in secure business premises and secure loading and shipping areas.
 - are protected against unauthorized interference during production, storage, preparation, loading and transport.
- reliable staff is employed for the production, storage, preparation, loading and transport of these goods.
- business partners who are acting on my behalf are informed that they also need to ensure the supply chain security as mentioned above.

Date/Place

Name/Position

Company stamp/Signature