



QUESTIONNAIRE FOR PROJECT CONSULTANCY

(For Formal Quote)

Confidential

Page 124/12/2004

Quality

Management

Excellence

(Indicate as appropriate)

For a formal quotation of fees, please complete in detail and forward to our nearest office.

Standard applicable _____ e.g. ISO 9001, HR, Finance, Management Services etc

Company or Organisation: _____

Address: _____

Telephone Number: _____

Fax Number: _____

E-mail: _____

Web site: _____

Contact: _____

Position: _____

1. Please describe in the box below your business activity to be assisted or consulted upon.

Timeframe & datelines /Performance Criteria etc.

CONTINUED OVERLEAF

Quality Management Excellence Sdn. Bhd.

e-mail: info@gme2u.com

website: www.gme2u.com

© Copyright, All Rights Reserved by QME™

Building Success Through Interdependence & Quality Development

2. How many employees involved in the operations applied for? Full-time ____ Part-time ____

Do you operate a shift system? YES / NO How many employees are on shifts? (%)
Please describe any activities of other shifts, not covered by the day shift. (ISO Projects)

3. Are any activities carried out at other locations? For example, any installation work or satellite offices, depots and warehouses. YES/NO

If YES please give details of location, activity and how many employed: (ISO Projects)

4. If you are a new customer, how did you hear about QME? (e.g. from associates [please give name], business contact, advert etc.)

5. Do you manufacture any specialist or regulated products that are subject to government directives (such as permits)? If so, please give details of regulatory or legislative requirements:

6. Have you produced a systems manual and procedures? YES / NO

7. Please supply the following for ISO 9001, 14000, 18001 and TS 16949 projects: -
a) site plan (a simple sketch is appropriate, geographical location and site services)
b) list of main materials stored on site
c) list of permits, licences or consents
d) list of relevant regulatory requirements
e) list of identified environmental aspects
f) list Scope of Registration (Pls attach Organisation chart and process description)
f) details of facilities shared with other organisations.

Name: _____

Signed: _____

Position: _____

Date: _____