

ENF Solar Assessed Supplier

Assessment Report Presented to:

*****Co., Ltd.
XXX有限公司

Service Commissioned by:



Service Provided by:



September 12, 2017

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Report Date: Enter a date.

Expiry Date: Enter a date.

Introduction

This report has been commissioned by ENF Solar – the world’s most visited solar website. Inspections have been undertaken by TÜV Rheinland – a testing service provider who have been testing solar components since 1985. TÜV Rheinland is part of TÜV Rheinland Group, a technical services company established in 1872 and employing 17,000 staff around the world.

To make these reports, TÜV Rheinland sends inspectors directly to the factories to collect data, take pictures and check documents.

TÜV Rheinland’s Disclaimer:

This report reflects our findings for the particular company in concern on the date of our service only. This report does not discharge or release the factory/sellers/suppliers from their commercial, legal or contractual obligations with buyers in respect of products provided by the factory/sellers/suppliers. Any reader other than the party for which this report has been specifically issued is hereby informed that the General Conditions of Service of TÜV Rheinland contain liability limitation provisions.

The objective of validating supplier information is to provide additional confidence to buyers so that they know the information has been verified by an independent third party.

The TÜV Rheinland “Supplier Capability Assessment” program is not designed to be a performance standard but rather an information validation program against an established criterion providing potential buyers with information on the establishments stated claims and capabilities.

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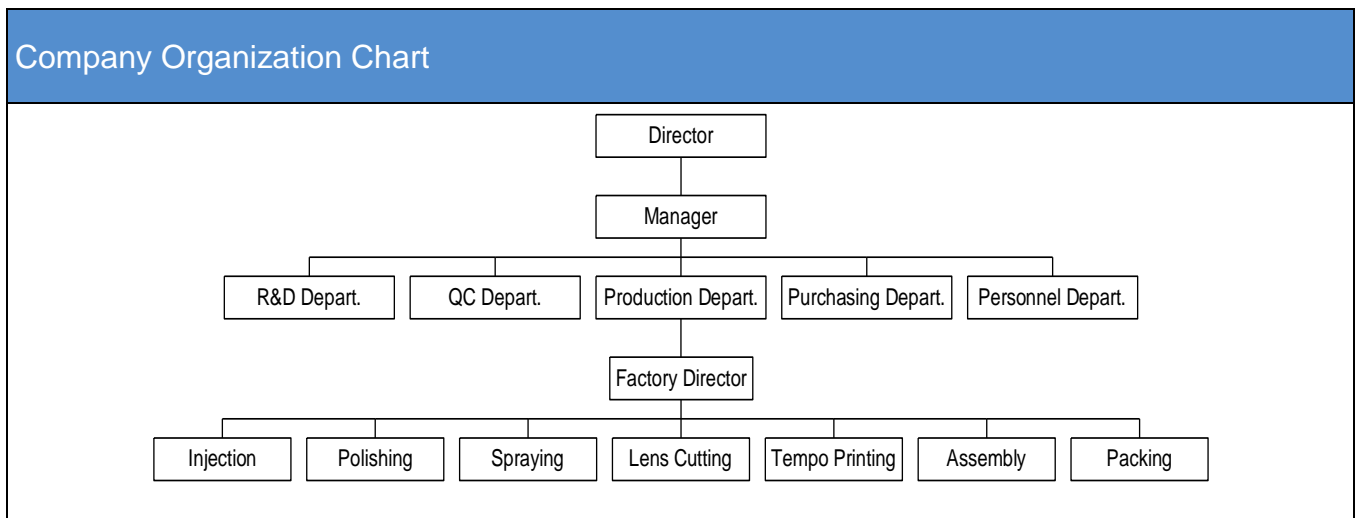
Company Overview

Identification	Details		
Company Name	Co., Ltd.		
Facility address	Guangdong Province, China		
	Contact Person:		
	Tel:		
	Fax:		
	E-mail:		
URL/Web Address			
Report Date			
Expiry Date (12 months validity)			
Name of Assessor			
Overall Turnover of Last Year			
Total Building Size			
Number of Buildings			
Office Size			
Working Day	Mon. to Sat.	Working Hours	08:30 -- 11:30 13:30 -- 17:00

Legal Entity

Legal Entity			
Business License Number			
Year Established		Validity Period:	
Registered Address			
Company Address			
Registered Capital			
Corporate Representative			
Industry			
Products /Service			
Business Type	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Trading Company	<input type="checkbox"/> Combined
Type of Ownership	<input type="checkbox"/> Private Owner	<input type="checkbox"/> Public Company	<input type="checkbox"/> Joint Venture
	<input type="checkbox"/> Stated Owned	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other

Human Resources



Department Name	Full Time Employee(s)	Part-Time Employee(s)	Total
Supervisor/Managers	-	-	-
Administration Staff	-	-	-
Quality Control Staff	-	-	-
Engineering Staff	-	-	-
Workers	-	-	-
Totals	-	-	-

Export Business Capacity

Current Export Situation																																			
There is/are foreign trading employee(s) in the company.																																			
<table border="1"> <thead> <tr> <th>Working Experience</th> <th>Headcount</th> </tr> </thead> <tbody> <tr> <td>Over 30 Years</td> <td>-</td> </tr> <tr> <td>21-30Years</td> <td>-</td> </tr> <tr> <td>11-20 Years</td> <td></td> </tr> <tr> <td>6-10 Years</td> <td></td> </tr> <tr> <td>2-5 Years</td> <td></td> </tr> <tr> <td>Less than 2 years</td> <td></td> </tr> </tbody> </table>		Working Experience	Headcount	Over 30 Years	-	21-30Years	-	11-20 Years		6-10 Years		2-5 Years		Less than 2 years		<table border="1"> <thead> <tr> <th>Accepted Language</th> <th>Listening & Speaking</th> <th>Reading & Writing</th> </tr> </thead> <tbody> <tr> <td>English</td> <td>Yes</td> <td>Yes</td> </tr> <tr> <td>Japanese</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Accepted Language	Listening & Speaking	Reading & Writing	English	Yes	Yes	Japanese											
Working Experience	Headcount																																		
Over 30 Years	-																																		
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Accepted Language	Listening & Speaking	Reading & Writing																																	
English	Yes	Yes																																	
Japanese																																			
Does the company have a valid export license?	<input type="checkbox"/> Yes Export License Registration No.: _____		<input type="checkbox"/> No																																
Trade Agents Employed Overseas	<input type="checkbox"/> Yes		<input type="checkbox"/> No																																
Nearest Port																																			
Accepted Payment Terms	<input type="checkbox"/> FOB	<input type="checkbox"/> CIF	<input type="checkbox"/> EXW <input type="checkbox"/> CFR																																

Accepted Payment Types	<input type="checkbox"/> L/C	<input type="checkbox"/> T/T	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Cash
	<input type="checkbox"/> West Union	<input type="checkbox"/> Money Gram	<input type="checkbox"/> Paypal	<input type="checkbox"/> Money booker
Average lead time from product order confirmation to production delivery (products exiting the company)				

Market Distribution (Previous 12 Months)		
Market	Main Product(s)	Total Revenue (%)
North America		
South America		
Eastern Europe		
Southeast Asia		
Africa		
Oceania		
Middle East		
Eastern Asia		
Western Europe		
Central America		
Northern Europe		
Southern Europe		
South Asia		
Domestic Market		

Product Capabilities

Production Capacity		
Product Name	Production Line Capacity	Actual Units Produced (Previous Year)

Production Machinery			
Key Machine Name	Brand & Model No.	Quantity	Condition
Cutting Machine			
Machine 2			
Machine 3			
Machine 4			

Cutting Machine	Machine 2	Machine 3

Machine 4	Machine 5	Machine 6
Machine 7	Machine 8	Machine 9

Key Testing Machinery			
Machine Name	Brand & Model No.	Quantity	Condition
Cutting Machine			
Machine 2			
Machine 3			
Machine 4			
Machine 5			

Machine 1	Machine 2	Machine 3
Machine 4	Machine 5	Machine 6
Machine 7	Machine 8	Machine 9

Production Flow

1	2	3
4	5	6
7	8	9

R & D Capacity

Current Situation

There is/are X R&D engineer(s) in the company.

Education Level	Headcount
Doctorate	
Post-Graduate	
Graduate	
Junior College	
Technical School	
High School	

Work Experience	Headcount
Over 30 Years	
21-30 Years	
11-20 Years	
6-10 Years	
2-5 Years	
Less than 2 years	

Brand Situation

Registration/application No.	Brand Name	For Approval to Use Goods	Validity Date	Ref.

Patent Situation

Patent No.	The Name of the Patent	The Patent Type	Available Date	Ref.
Does the company provide OEM/ODM service for others?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there relevant design input/output, review, and verification documents available for the assessed company?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Based on inspection, are R&D employees equipped with adequate specialized equipment?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do R&D employees use any specific software for designing new products?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

Development Devices

Device 1	Device 2	Device 3
Device 4	Device 5	Device 6

Management Systems & Quality Control Management

Quality Management System Certification

Certification	Certified By	Certificate No.	Business Scope	Expiry Date

Product Certification

Certification	Certified By	Certificate No.	Product Name & Model No.	Expiry Date

Test Report			
Test Report	Certified By	Product Name & Model No.	Expiry Date

Quality Control Management			
Content	Observations / Comments		
Does the company set up any inspection standards for raw materials?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has the company set up necessary quality inspection standards in the process of production?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the company have any measures to control the management of unqualified materials after sampling, to avoid mixing up or wasting?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are work instructions available at the location where the processes take place?	<input type="checkbox"/> Total line	<input type="checkbox"/> Parts of the line	<input type="checkbox"/> No
Is personal protective equipment (PPE) needed in the production line?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is the management and usage of production materials as well as the production process executed by staff who are appropriately trained and qualified or by senior staff?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Supplier Management			
Content	Observations / Comments		
Does the company have a supplier assessment procedure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the company establish and implement a standard procedure for purchasing contract review and approval?	<input type="checkbox"/> Yes, with written standard procedures	<input type="checkbox"/> Yes, with written procedure but lack of consistent standard	<input type="checkbox"/> No

Does the company keep its supplier assessment reports?	<input type="checkbox"/> Yes, Keep for ___ years available			<input type="checkbox"/> No
Are the company's purchasing documents sufficient to ensure product safety control and their customers' requirements?	<input type="checkbox"/> Yes, the purchasing document includes all the information required	<input type="checkbox"/> Yes, however the purchasing document includes incomplete information		<input type="checkbox"/> No
Is there a procedure to conduct random product inspections after final packaging?	<input type="checkbox"/> Yes, with clear standard and written inspection records	<input type="checkbox"/> Yes, with inspection records but no procedures	<input type="checkbox"/> Yes, with procedures but no inspection records	<input type="checkbox"/> No, inspections are not necessary

After Sales Service				
Content	Observations / Comments			
Has the company set up any procedure for customer feedback, including complaints, clearly recorded and maintained?	<input type="checkbox"/> Yes, with a standard feedback form and records	<input type="checkbox"/> Yes, with a standard feedback form but no records	<input type="checkbox"/> Yes, with records but no standard feedback form	<input type="checkbox"/> No
Are there any clear procedures for handling customer complaints?	<input type="checkbox"/> Yes, with clear procedures and written records	<input type="checkbox"/> Yes, with clear procedures but no written records	<input type="checkbox"/> Yes, with written records but no clear procedures	<input type="checkbox"/> No
Does the company have the SOP (Standard Operation Procedure) for after-sales service? Does the company provide after-sales consulting services?	<input type="checkbox"/> Yes			<input type="checkbox"/> No
Does the company implement the provisions of the National Three Warrantees (warranty for repair/replacement /return) for their products?	<input type="checkbox"/> Yes			<input type="checkbox"/> No

Corporate Social Responsibility

Child Labour & Forced Labor		
Content	Observations / Comments	
Is it clarified that there's no child labor in the company?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company have an explicit job management program, and take corresponding measures to check the age of the employees?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are the staff clearly aware of the terms of labour contract, regulations of the company and the right of free employment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have the staff been forced to work overtime? Will they be fined or fired if they refuse to?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Health and Safety		
Content	Observations / Comments	
Has the company set up a safety responsibility system, and distributed to all levels of supervisor and provided them with corresponding training?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company conduct regular inspection of the plant and equipment, to ensure the health and safety of the workshop at least in accordance with the law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company regularly provide necessary safety and health training, to make the staff understand that there might be occupational hazards in their work, and take appropriate protective measures when necessary? (For example, how to use personal protective equipment safely, etc.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company hold regular fire drills, including fire drills and evacuation drills? Do the staff clearly know how to raise an alarm, how to evacuate and how to use the fire extinguisher?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company have the approval report issued by the local Fire Bureau?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company provide sufficient first aid equipment? Are first-aid kits and trained first-aiders available in each workplace?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Does the company provide clean lavatories, separating men's and ladies'?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the company provide clean drinking water to the staff? Is there unrestricted access to the drinking water?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Development / Expansion Plans

Company Development / Expansion Plans	
Company Development Action	Timeframe
The company is going to	12 Months
The company is going to	12 Months
The company is going to	12 Months

Certification & Photos

Certification

Business License	Tax Registration Certificate
Permit for Opening Bank Account	Organization Code Certificate

Certificate Photo	Certificate Photo
Certificate Photo	Certificate Photo
Company Gate	Office
Workshop	Workshop

Warehouse	Warehouse
Product Photo	Product Photo
Product Photo	Product Photo
Product Photo	Product Photo
Product Photo	Product Photo

