



# ARRK Europe Ltd - SUPPLY BASE ENTRY AND EXIT REQUEST

## SUPPLY BASE ENTRY & EXIT REQUEST DOCUMENT

**THIS DOCUMENT IS TO BE COMPLETED BY THE ORIGINATOR BEFORE A SUPPLIER ACCOUNT CAN BE CREATED OR DELETED. THE ORIGINATOR MUST ALSO GET THE SUPPLIER TO SIGN THE PAYMENT TERMS SECTION BELOW. IT IS THE RESPONSIBILITY OF THE ORIGINATOR TO ENSURE THAT ALL DETAILS ARE GIVEN. ONCE COMPLETED PLEASE SEND TO THE PURCHASING DEPT FOR APPROVAL**

ORIGINATOR	<input type="text"/>		
DEPARTMENT	<input type="text"/>		
EXT NUMBER	<input type="text"/>	<b>TYPE OF SUPPLIER</b> <input type="checkbox"/> MANUFACTURING <input type="checkbox"/> CONSUMABLE	
DATE OF REQUEST	<input type="text"/>	Consignment supplier? <input type="checkbox"/> Y <input type="checkbox"/> N	
DATE OF SUBMISSION TO PURCHASING DEPT	<input type="text"/>	PLEASE DELETE AS APPROPRIATE	

## PLEASE INDICATE NATURE OF REQUEST

NEW SUPPLIER	<input type="checkbox"/>	COMPLETE SECTIONS A, B, C and F
NEW SUPPLIER - customer specified	<input type="checkbox"/>	COMPLETE SECTIONS A, B, C and F
AMMENDMENT TO EXISTING SUPPLIER	<input type="checkbox"/>	COMPLETE SECTION "A & F" AND ALL SECTIONS TO BE AMMENDED
DELETION OF EXISTING SUPPLIER	<input type="checkbox"/>	COMPLETE SECTION "A & F" ONLY

**AFTER COMPLETING RELEVANT SECTIONS PLEASE GO TO SECTION 'F' AND SIGN REQUEST AND PASS TO THE PURCHASING MANAGER**

## SECTION A - JUSTIFICATION

SUPPLIER NAME	<input type="text"/>
NATURE OF SUPPLIER	<input type="text"/>
SUPPLIER VENDOR NUMBER / REFERENCE	<input type="text"/>
JUSTIFICATION FOR AMMENDMENT, ADDITION OR DELETION	<input type="text"/>

## SECTION B - SUPPLIER DETAILS

<b>CURRENT APPROVALS</b>			
BS EN ISO 9001	<input type="checkbox"/>	BS EN ISO 9002	<input type="checkbox"/>
TS16949	<input type="checkbox"/>	AS 9100	<input type="checkbox"/>
ISO 14001	<input type="checkbox"/>	MOD	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
NONE	<input type="checkbox"/>	OTHER	<input type="checkbox"/>

SUPPLIER QUALITY MANAGER EMAIL ADDRESS

THIS EMAIL IS CRITICAL AS ITS NEEDED TO POPULATE THE **SUPPLIER PERFORMANCE EMAIL** FIELD ON MFG PRO, WHICH SENDS SUPPLIER PERFORMANCE DATA TO THE SUPPLIER ON A WEEKLY BASIS

SUPPLIER LOGISTICS / OPERATIONS MANAGER EMAIL ADDRESS

THIS EMAIL IS CRITICAL AS ITS NEEDED TO POPULATE THE MIN / MAX **SUPPLIER NOTIFICATION EMAIL** FIELD ON MFG PRO, WHICH SENDS THE SUPPLIER MIN / MAX STOCK LEVEL DATA AT SWANN TO THE SUPPLIER ON A DAILY BASIS

**THE ABOVE EMAIL FIELDS MUST BE FILLED IN REGARDLESS OF THE LOGISTICS ROUTING**

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**SUPPLIER PURCHASING SITE**

**SUPPLIER PAYMENT SITE ( IF DIFF )**

ADDRESS		
POSTCODE		
COUNTRY		
CONTACT NAME		
POSITION		
TELEPHONE		
FAX		
E-MAIL		
BANK NAME		
BANK ADDRESS		
BANK SORT CODE		
BANK ACCOUNT NAME		
BANK ACCOUNT NUMBER		
COUNTRY CODE		
PAYMENT CURRENCY		
VAT NUMBER		
DUNS NUMBER		
COMPANY REGSITRATION NO.		

**PLEASE BE AWARE THAT ARRK EUROPE LTD STANDARD PAYMENT TERMS ARE 60 DAYS MONTH END.ANY REQUEST FROM DEVIATION FROM THESE TERMS WILL NEED TO BE SANCTIONED IN WRITING BY THE PURCHASING / ACCOUNTS MANAGER PRIOR TO ANY ORDER BEING PLACED WITH THE ABOVE SUPPLIER. IT IS THE ORIGINATORS RESPONSIBILITY TO MAKE SURE SUPPLIERS UNDERSTAND THIS TERM. BY SUBMITTING THIS FORM FOR APPROVAL YOU ARE CONFIRMING THAT THESE CONDITIONS OF PAYMENT HAVE BEEN DISCUSSED AND AGREED WITH THE ABOVE SUPPLIER**

**SUPPLIER TO SIGN TO AGREE TO 60 DAYS M/E PAYMENT TERMS**

SIGN	
PRINT	
DATE	

**AGREED PAYMENT TERMS ( PLEASE TICK BOX )**

30 DAYS M/E	<input type="checkbox"/>
60 DAYS	<input type="checkbox"/>
60 DAYS M/E	<input checked="" type="checkbox"/>

**AGREED DEVIATION BY (PUR DIR OR MANAGER )**

SIGN	
PRINT	
DATE	

**SECTION C - SUPPLIER PROOF OF IDENTITY / REFERENCES**

HAVE PROOF OF SUPPLIER AND SUPPLIER REFERENCES BEEN ATTACHED TO THIS FORM ?

<b>Y</b>	<b>N</b>
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IS A CREDIT ACCOUNT REQUIRED ?

<b>Y</b>	<b>N</b>
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**SECTIONS D, E, G & H FOR PURCHASING USE ONLY -**

**SECTION I FOR ACCOUNTS ONLY**

**SECTION D - JUSTIFICATION ANALYSIS**

IS THE PROPOSED SUPPLIER ADDITION / DELETION JUSTIFIED ?

<b>Y</b>	<b>N</b>
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( if no - please give reason for rejection - then proceed to section H )

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### SECTION E - ASSESSMENT RESULTS

ASSESSMENT	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL	SEE ASSESSMENT REPORT No -	<input type="text" value="N/A"/>
IS THERE TOOLING INVOLVED ?			<input type="checkbox"/> Y	<input type="checkbox"/> N
IF SO, HAS THE TOOLING MATRIX BEEN COMPLETED			<input type="checkbox"/> Y	<input type="checkbox"/> N

### SECTION F - ORIGINATOR SIGNATURE

ORIGINATOR ( PRINT )	<input type="text"/>
ORIGINATOR ( SIGN )	<input type="text"/>
DATE	<input type="text"/>

### SECTION G - AUTHORISATION SIGN OFF

REQUEST ACCEPTED / REJECTED	<input type="checkbox"/> ACCEPT	<input type="checkbox"/> REJECT
COMMENTS	<input type="text"/>	

### SECTION H- ACCOUNT DEPT PROCESSING

DETAILS PASSED TO ACCOUNTS DEPT	<input type="checkbox"/> Y	<input type="checkbox"/> N	SIGN	<input type="text"/>
SUPPLIER ENTERED ON SYSTEM ( accounts )	<input type="checkbox"/> Y	<input type="checkbox"/> N	DATE	<input type="text"/>

Purchasing Manager / Director Sign Off	<input type="text"/>
NAME = SIGN AND PRINT	<input type="text"/>
DATE	<input type="text"/>