



Name:
Department:
Tel. No.:
Fax No.:
E-Mail:

Supplier Information Sheet third party Suppliers (SIS) In accordance with Supplier Qualification Process of ABB Switzerland Ltd

Company: Region / District:

Address:

ZIP-Code / City:

Country:

VAT number:

Phone:

Fax:

E-mail:

E-mail to sales department:

Currency:

Ownership:

Internet Homepage:

Place(s) of Manufacturing

Main location:

2nd location:

3rd location:

Responsible (if applicable)

Extension

Name

Language

General Manager:

Key Account Manager:

Production Manager:

Quality Manager:

Company Sales

Total / Currency

with ABB / Currency

Number of Employees

Previous year:

Current year:

Account Information

Bank Name:

Bank Number (BLZ):

Bank Account:

SWIFT Code:

IBAN:

Routing number/Bank Key:

Qualified by another ABB Company

Which?

When?

International Certifications

According to:

ISO 9001

ISO 14001

OHSAS18001

Other:

Year of certification:

Do you accept the ABB General Terms and Conditions 2017-1?

No

Yes

Sign:

If no:

Do you commit to the same level of ethical behavior as ABB?

No

Yes

Sign:

Do you commit to follow ABB Supplier Requirements?

No

Yes

Sign:

Aberrant Agreements (Entry only after Agreement with ABB)

Sign:

Major Customers

Name

Place

Sales Volume / Currency

1)

2)

3)

	Supplier	ABB LBU Purchase Assistant	ABB LBU SCM Manager
Date and sign			
Name and function			

Requested affixation: Organization chart by
Reference lists

Copy of certificate
Annual report