



VENDOR APPLICATION

Return completed form to AP@TheArmorGroup.com

Applicant Name

Remit to Name *(If different)*

Mailing Address

City

State

Zip Code

Accounts Receivable Contact

Phone

Email

Payment terms 1% 20, Net 60

Banking Information (Required, payments are processed via ACH)

Bank Name

Checking

Savings

Routing No.

Account No.

Remittance Email:

Applicant Signature:

Printed

Title

Date

Please submit all invoices to AP@TheArmorGroup.com

Armor Accounts Payable Contact:

Rebecca Rusnak, rrusnak@TheArmorGroup.com, 513-923-5759

Armor Use Only

Buyer Name

Accounting Approval

Entered By

Date

Vendor #

Vendor Quality Questionnaire

Company Name:

Please complete Part A or B below, sign and return with Application

PART – A (for a company holding internationally recognized quality standard certification)

Standard of Certification:

Registrar’s Name:

Date of Issue:

Certificate Number:

File Number:

Expiration Date:

Attach copy of certificate

PART – B (for a company NOT holding internationally recognized quality standard certification)

	Yes	No
1. Do you plan to obtain internationally recognized certification in the near future?	<input type="checkbox"/>	<input type="checkbox"/>
2. Does your company have a Quality Management System, including a Quality Manual with controlled procedures, processes, and work instructions?	<input type="checkbox"/>	<input type="checkbox"/>
3. Does your company have a documented Contract Review process?	<input type="checkbox"/>	<input type="checkbox"/>
4. Does your company have an Internal Auditing Program with documented audits?	<input type="checkbox"/>	<input type="checkbox"/>
5. Does your company have formal Root Cause & Corrective Action process to address non-conformances?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your company conduct & document incoming material inspections?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your company conduct & document In-process Inspections?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does your company conduct & document final inspections?	<input type="checkbox"/>	<input type="checkbox"/>
9. Does your company follow a controlled process to verify compliance?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are inspection records kept on file and available for review by customers?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are purchased material part numbers identified and traceable?	<input type="checkbox"/>	<input type="checkbox"/>
12. Is in-process material identified and traceable?	<input type="checkbox"/>	<input type="checkbox"/>
13. Is non-conforming purchased material identified and protected from use?	<input type="checkbox"/>	<input type="checkbox"/>
14. Is in process material identified and protected from use?	<input type="checkbox"/>	<input type="checkbox"/>
15. Does your company have a documented process for the control and calibration of measuring and testing equipment?	<input type="checkbox"/>	<input type="checkbox"/>
16. Can your company provide Certificate of Analysis when requested?	<input type="checkbox"/>	<input type="checkbox"/>
17. Does your company have a managed Environmental Health & Safety department?	<input type="checkbox"/>	<input type="checkbox"/>
18. Does your company have a defined Environmental Health & Safety policy supported by Senior Management?	<input type="checkbox"/>	<input type="checkbox"/>
19. Is the Environmental Health & Safety policy included in new employee onboarding?	<input type="checkbox"/>	<input type="checkbox"/>

Completed By: Name (PRINT):

Signature:

Job Title:

Date: