Ośrodek Badawczo-Rozwojowy Przemysłu Płyt Drewnopochodnych sp. z o.o. Zakład Certyfikacji ul. Mickiewicza 10a, 83-262 Czarna Woda tel. (0-58) 587 8216, fax (0-58) 587 8716 www.obrppd.com.pl, e-mail: obrppd@obrppd.com.pl

MANUFACTURER'S QUESTIONNAIRE OF THE DPW-C PROGRAM

Production plant: name, address	Tel.:
	Fax:
	E-mail

- 1 Quality system:
 - Do you use the quality system?

yes/no,

Is the quality system certified?
yes/no,
If the quality system is certified, please explain: by whom, based on which norm or regulations,
expiration date, who in the plant is responsible for the quality system (*name, position, telephone*).

If you have the quality system, please do not fill the further part of the questionnaire, and make the system documentation available for review. If you have any certificates, please attach the copies.

- 2 Product quality control system 2. Product quality control system
- 2.1.1. Product origin
- 2.1.2. Own production yes / no
- 2.1.3. Supplied external yes / no
- 2.2. Raw material quality control
 - is the list of raw materials suppliers available? yes/no
 - The delivered raw materials have any certificates or quality certificates yes/no
 - Do you perform any control tests? ves/no
 - Are the control tests performed in the own laboratory? yes/no
 - How often are the control tests performed? each batch/periodically/occasionally

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- Number of complaints submitted last year
- Number of complaints accepted by suppliers

2.3. Technological process control

- Are the technological instruction prepared and used? yes/no
- Is the familiarity of the technological instructions checked by the operating personnel?
 - yes/no
 - Is the inter-operational process control performed? ves/no
- Do you keep the records from the inter-operational control? yes/no
- Is the product quality control personnel regularly informed about any changes in the technological processes (*e.g.*. changes of the glue types, quantity, pressing parameters, etc.)

yes/no

 Are the information about the changes in the technological process registered? yes/no

2.4.	Pro –	Do you have the quality control department?
		yes/no
	-	Who is in charge
	-	The person responsible for the quality supervision (Name, position)
	_	Do you have the quality control instruction? yes/no
	-	Is defined what determine the product batch intended for tests yes/no
	_	Is the product batch identification possible? yes/no
	-	Are the sampling and sample processing procedures existing? yes/no
	-	How frequently the sampling procedures are performed?
	_	What characteristics are tested? Are the tests performed in the own laboratory?
		yes/no (If yes, pleas fill the further part of the questionnaire
		regarding the laboratory equipment)
	_	Are the test procedures elaborated? yes/no
	-	Is the laboratory taking part in the analytical tests? yes/no
	-	What characteristics are tested outside?
	_	What laboratory is the subcontractor for the product tests?
	-	Are the periodical product tests performed by the independent laboratories? yes/no
	-	Are the product test results registered? yes/no
	-	Do you had any product quality complaints in the last year, because the product was not fulfilled the specifications being the subject of the certification? yes/no
	_	Number of complaints
	_	Number of accepted complaints
	-	Share of the accepted complaints in relation to the production %

Signature

(First and last name, position)

Date:

No.	Name, type	Symbol	Calibration/Inspection	
			Certificate	Expiration date

List of the equipment used for the product tests

Signature

(First and last name, position)

Date: