

Questionnaire for Service Providers

General Information:

Business registration available: ☐ Yes ☐ No
Commercial register entry available: ☐ Yes ☐ No

Service Information:

Use of own staff: ☐ Yes ☐ No
Use of subcontractors: ☐ Yes ☐ No
(If yes, only with the Client's prior approval)

Insurance / Data Protection:

(Business) liability insurance available: ☐ Yes ☐ No
Coverage amount in EUR: _____
Non-Disclosure Agreement (NDA) required/available: ☐ Yes ☐ No

Information (where applicable):

Registered with the Chamber of Crafts (HWK): ☐ Yes ☐ No
Accident insurance available: ☐ Yes ☐ No
Compliance with occupational health & safety regulations: ☐ Yes ☐ No
Qualification / Master Certificate available: ☐ Yes ☐ No

legal declaration:

Upon request, all relevant evidence must be made available to the client.

By signing this document, the contractor confirms that all information provided is complete, accurate and up to date.

place: _____

date: _____

stamp & signature:

