NEXUS

NEXUS INDUSTRIAL GROUP, LLC
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NEW SUPPLIER FORM.

SUPPLIER SETUP AND QUALIFICATION · RETURN TO CONTACT@NEXUSINDUSTRIAL.COM

FORM	DATE ISSUED	SUPPLIER ID · NEXUS USE	DATE RETURNED
NXS-SQ-01 · Rev B			

Complete every section and return this form with the attachments listed in Section 09. Nexus Industrial Group uses this information to set up the supplier account and to assess quality and commercial fit. Write "N/A" where a field does not apply.

01
SECTION

COMPANY

LEGAL NAME	
TRADING NAME / DBA	
ADDRESS	Street address City / State / ZIP
COUNTRY	
REMIT-TO ADDRESS	Same as above Otherwise
YEAR ESTABLISHED	
EMPLOYEES	
WEBSITE	

TAX ID / EIN	
DUNS	
ENTITY TYPE	☐ Corporation ☐ LLC ☐ Partnership ☐ Sole proprietor ☐ Other

02 SECTION — CONTACTS

SALES	QUALITY	ACCOUNTS RECEIVABLE
Name	Name	Name
Title	Title	Title
Email	Email	Email
Phone	Phone	Phone

03 SECTION — SUPPLY CATEGORY

☐ Raw material ☐ Forgings ☐ Castings
☐ Machined parts ☐ Heat treatment ☐ Plating and coating
☐ Testing and inspection ☐ Logistics ☐ Services

Other

BUSINESS CLASSIFICATION

☐ Small business ☐ Woman-owned ☐ Minority-owned
☐ Veteran-owned ☐ HUBZone ☐ None of these

04 SECTION — CERTIFICATIONS HELD

CERTIFICATION	HELD	CERTIFICATE NO.	ISSUED BY	EXPIRY
ISO 9001:2015	☐			
API Spec Q1	☐			
API Spec 6A licence	☐			
AS9100	☐			

ISO 14001	☐			
ISO 45001	☐			
Other	☐			

05

SECTION

CAPABILITIES

☐ Forging ☐ Casting ☐ CNC machining

☐ Heat treatment ☐ Plating and coating ☐ In-house test laboratory

☐ NDE / NDT ☐ Welding ☐ Assembly

Other _____

06

SECTION

QUALITY SYSTEM

QUALITY MANUAL REV	
LAST THIRD-PARTY AUDIT	Date _____ Audited by _____
CALIBRATION PROGRAM	☐ Yes ☐ No
HEAT-TO-PART TRACEABILITY	☐ Yes ☐ No
NONCONFORMANCE PROCESS	☐ Yes ☐ No Attach procedure if yes
ON-TIME DELIVERY, 12 MO	%
QUALITY REJECTS, 12 MO	% or PPM

07

SECTION

COMMERCIAL AND PAYMENT

PAYMENT TERMS OFFERED	
CURRENCY	
TYPICAL LEAD TIME	

SHIPPING TERMS / INCOTERMS	
MINIMUM ORDER	
PAYMENT METHOD	☐ ACH ☐ Wire ☐ Check
BANK NAME	
ACCOUNT NAME	
ROUTING (ABA) NO.	
ACCOUNT NO.	
SWIFT / BIC (INTERNATIONAL)	

BANKING

Attach a bank letter or voided check that confirms the account details. Nexus verifies banking details by phone before the first payment and before any change.

08 SECTION — INSURANCE

COVERAGE	CARRIER	POLICY LIMIT	EXPIRY
General liability			
Product liability			
Auto liability			
Workers' compensation			

☐ Certificate of insurance attached

09 SECTION — ATTACHMENTS

☐ Form W-9 (or W-8 for non-US suppliers)

☐ Certificate of insurance

- ☐ ISO / API certificates listed in Section 04
- ☐ Quality manual or quality policy
- ☐ Bank letter or voided check
- ☐ Signed mutual NDA (issued separately)
- ☐ Signed supplier terms and conditions (issued separately)

10

SECTION

DECLARATION

The information in this form is accurate and complete. The supplier will notify Nexus Industrial Group in writing of any change to ownership, certifications, banking or insurance details.

COMPLETED BY · SUPPLIER	REVIEWED BY · NEXUS SUPPLY CHAIN
SIGNATURE	SIGNATURE
PRINTED NAME	PRINTED NAME
TITLE	TITLE
DATE	DATE

NEXUS INTERNAL USE ONLY

DO NOT WRITE BELOW THIS LINE

SUPPLIER ID

APPROVAL STATUS

☐ Approved ☐ Conditional ☐ Rejected

AUDIT REQUIRED

☐ Yes ☐ No

APPROVED SUPPLIER LIST UPDATED

☐ Yes ☐ No

APPROVER

DATE