



VQF – Vendor Qualification Form

1 Vendor's Name (English):	HANGZHOU LINAN HUASHENG DAILY NECESSITIES CO.,LTD				Vendor's Name (Chinese):	杭州临安华盛日用品有限公司					
2 Web Address (English):	www.hsnonwoven.com; www.allcleaningwipes.com				Web Address (Chinese):						
3 Year of Establishment:	2006	Export License:	2014	Company Registered in:	Hong Kong	China	UK	USA	Other		
4 Address (English):	NO.107,DIANJITOU,YAYUAN VILLAGE, LINGLONG STREET,LIN'AN,HANGZHOU CITY				Address (Chinese):	杭州市临安区玲珑街道雅园村店基为107号					
5 Telephone:	15868462181			Fax:	Please enter FAX number here						
6 Product & Services	PCB Manufacture	SMT	Component Sourcing	Mechanical Assembly	Other	&	Plastic Mould	Plastic Injection	Metal Stamping	Rubber	Electronic
7 Mode of production	OEM		ODM		8 3D CAD file	Solidworks		Auto Desk		Other:	
9 Main market	North America	South America	Europe	Australia	Middle East	Asia-Pacific	Local market	Other markets not mentioned			
10 business turnover of 2020	12,000,000USD										
11 No. of Employees:	Administrati on:	Engineerin g:	R&D:	Laboratory	QA & QC:	Office:	Production :	Other 1:	Other 2:	Other 3:	Total
	5	1	2		2	6	28				44
12 Contact Person (English):	First Name:	Family Name:	Title:	Mobile:	Other:	Contact Person (Chinese):	First Name:	Family Name:	Title:	Mobile:	Other:
	Jie	Cheng	Sales Manager	15868462181		洁	程	外贸经理	1.5868E+10		
	E-Mail					Skype					Other
	vera@zjhuasheng.com					still919					
13 Manager Person (English):	First Name:	Family Name:	Title:	Mobile:	Other:	Manager Person (Chinese):	First Name:	Family Name:	Title:	Mobile:	Other:
	Tom	Huang	General Manager	13867168235		伟涛	黄	总经理	1.3867E+10		
	E-Mail					Skype					Other
	ruiying@zjhuasheng.com										
14 Owner Person (English):	First Name:	Family Name:	Title:	Mobile:	Other:	Owner Person (Chinese):	First Name:	Family Name:	Title:	Mobile:	Other:
	E-Mail					Skype					Other





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Additional Questions:

15 Can the Owner Communicate in English?	YES	NO	Partly
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

16 Is the business handled directly with the owners?	YES	NO	Partly
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

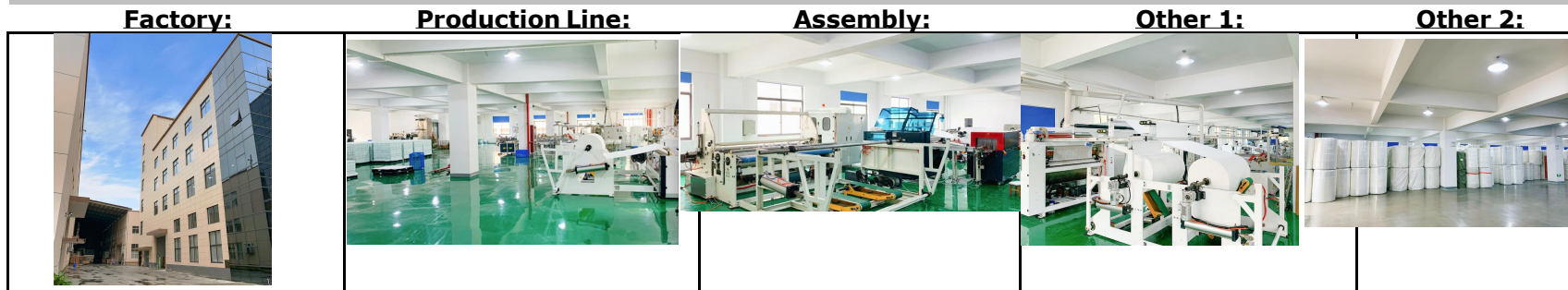
17 Is the manufacturer / supplier handling export business?	YES	NO	Partly
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Quality System:

18 Are there Company Procedures and Work Instructions?	YES	NO	Partly
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19 Is there a Quality System?	No	Yes	If Yes please Specify below (ISO
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ISO9001, BV,SGS,TUV

Pictures & Presentation:



20 Signed By (English):	First Name:	Family Name:	Title:	Mobile:	Other:	Company Chop:
