Holiadur Cyflenwyr

**Please scroll down for English**

**Gwybodaeth am y Cwmni**

Enw'r Sefydliad: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Rhif Cofrestru'r Sefydliad: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Cyfeiriad Lleol: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Enw a Rôl y Person Cyswllt: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
E-bost:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Rhif Ffôn: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maint y Busnes (ticiwch un):
[ ]  Micro (1-9 o weithwyr)
[ ]  Bach (10-49 o weithwyr)
[ ]  Canolig (50-249 o weithwyr)
[ ]  Mawr (249+ o weithwyr)

Strwythur Perchnogaeth:
[ ]  Unig Fasnachwr
[ ]  Partneriaeth
[ ]  Cwmni Cyfyngedig
[ ]  Menter Gymdeithasol
[ ]  Arall (nodwch os gwelwch yn dda) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Meysydd Arbenigedd**

Disgrifiwch y cynhyrchion/gwasanaethau y mae eich cwmni yn eu darparu: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Achrediadau / ardystiadau diwydiant perthnasol (ee, ISO, CHAS, Cyber Essentials): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cydymffurfiaeth Ychwanegol a Diwydrwydd Dyledus**

Ydych chi'n cydymffurfio â rheoliadau iechyd a diogelwch? [ ]  Ie [ ]  Na

Ydych chi wedi bod yn destun unrhyw gamau rheoleiddio neu gosbau yn ystod y pum mlynedd diwethaf?

[ ]  Ie (Atodwch fanylion os gwelwch yn dda) [ ]  Na

**Caniatâd Diogelu Data**
*Rwy'n cadarnhau fy mod wedi darllen a deall pwrpas y gronfa ddata hon ac yn rhoi caniatâd i Uchelgais Gogledd Cymru storio a phrosesu manylion fy nghwmni yn unol â rheoliadau diogelu data.*

**Llofnod:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
**Enw:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
**Swydd:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
**Dyddiad:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Diolch am eich cydweithrediad.

Supplier Questionnaire

**Organisation Information**

Organisation Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organisation Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organisation Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name

Contact Role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size of Organisation (tick one):
[ ]  Micro (1-9 employees)
[ ]  Small (10-49 employees)
[ ]  Medium (50-249 employees)
[ ]  Large (249+ employees)

Business Type:
[ ]  Sole Trader
[ ]  Partnership
[ ]  Limited Company
[ ]  Social Enterprise
[ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Areas of Specialism**

Please describe the products/services your organisation provides: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relevant industry accreditations/certifications (e.g., ISO, CHAS, Cyber Essentials): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Compliance & Due Diligence**

Are you compliant with health & safety regulations? [ ]  Yes [ ]  No

Have you been subject to any regulatory action or penalties in the last five years?

[ ]  Yes [ ]  No (If yes, please attach details)

**Data Protection Consent**

*I confirm that I have read and understood the purpose of this database and give consent for Ambition North Wales to store and process my organisation’s details in accordance with data protection regulations.*

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Position:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your cooperation.