

# Alibaba.com Verified Supplier



## Assessment Report

*Presented to*

**Cooperation Factory of Shandong Haokunda Metal Material Co., Ltd.**

**山东豪坤达金属材料有限公司合作工厂**

Gold Supplier & Assessed Company Relationship:	<input type="checkbox"/> Self-owned <input type="checkbox"/> Wholly Owned <input type="checkbox"/> Shareholder/Partner <input type="checkbox"/> Kindred between Owners <input checked="" type="checkbox"/> Cooperation Partner
Company Address	Confidential
City / Country:	Liaocheng / China
Consigner of Assessment:	Alibaba & Shandong Haokunda Metal Material Co., Ltd.
Gold Supplier Member ID:	haokunda
Gold Supplier Company Name:	Shandong Haokunda Metal Material Co., Ltd.
Contact Person:	Confidential
Phone Number:	Confidential
Fax Number:	Confidential
Email:	Confidential
Website Address (URL):	<a href="http://haokunda.en.alibaba.com">http://haokunda.en.alibaba.com</a>

*Service Provided by TÜV Rheinland*

*Report No.: 21123164\_P*



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Report No:	21123164_P	Report date:	07/Nov./2020	Assessed By	Honglei Lu	
CONFIDENTIAL		All Rights Reserved			Page No:	2 of 21



## Contents

**Section 1: Company Overview..... 5**

    1.1 Legal Validity..... 5

    1.2 Company Building Information ..... 5

**Section 2: Human Resources ..... 6**

    2.1 Company Chart ..... 6

    2.2 Employee Headcount..... 6

    2.3 Management ..... 6

**Section 3: Production Capacity ..... 7**

    3.1 Annual Production Capacity (Previous Year) ..... 7

    3.2 Production Capacity ..... 7

    3.3 Production Machinery..... 7

    3.4 Testing Machinery..... 7

    3.5 Subcontractors ..... 7

    3.6 Average Sampling Time..... 7

    3.7 The Shortest Sampling Time ..... 7

**Section 4: Quality Assurance ..... 8**

    4.1.1 Quality Management System Certification ..... 8

    4.1.2 Product Certification ..... 8

    4.2 Testing Report..... 8

    4.3 Quality Control Management..... 8

    4.4 Supplier Management ..... 8

    4.5 After Sales Service ..... 9

**Section 5: Production Process Management..... 11**

**Section 6: R & D Capacity ..... 12**

    6.1 Current Situation..... 12

    6.2 R&D Real Case Description ..... 13

    6.3 Design Process (Confidential) ..... 13

Report No:	21123164_P	Report date:	07/Nov./2020	Assessed By	Honglei Lu	
CONFIDENTIAL		All Rights Reserved			Page No:	3 of 21



6.4 Design Devices (N/A)..... 13

**Section 7: Company Development / Expansion Plans ..... 14**

**Section 8: Production Flow..... 15**

**Section 9: Certification & Photos ..... 16**

**Section 10: Company and Product Samples ..... 17**

**Section 11: Competitive Advantages ..... 18**

    11.1 Product Group Capacity ..... 18

    11.2 Real Case for Lower MOQ & Lead Time ..... 18

    11.3 Real Case for Large Contract & Lead Time..... 18

    11.4 Overseas After Sales Service Capacity..... 18

    11.5 After-sales service capacity ..... 19

**Section 12: Service capabilities..... 20**

    12.1 Experience with large-scale procurement contracts ..... 20

    12.2 Overseas showroom ..... 20

    12.3 Offline trade show ..... 20

**Section 13: Supply chain capability ..... 21**

    13.1 Centralized procurement ..... 21

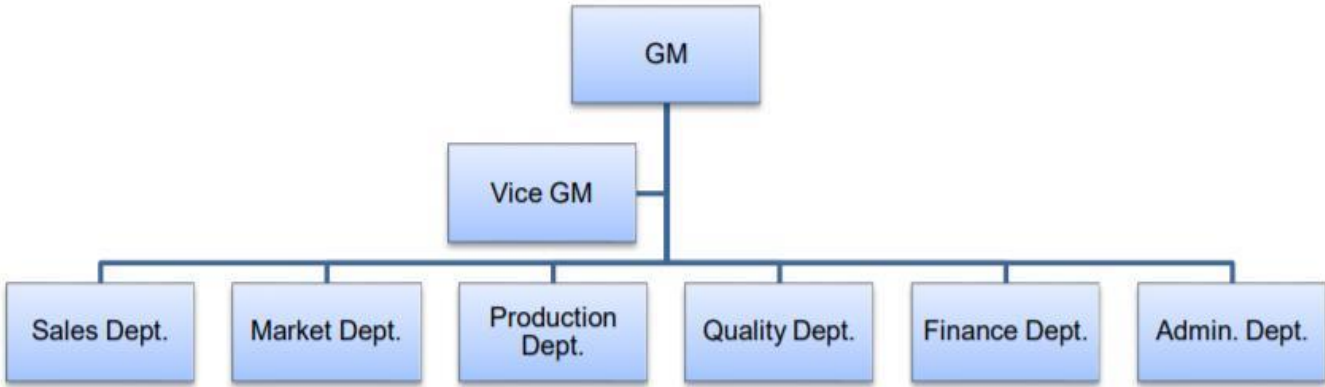
    13.2 Overseas warehouse ..... 21

Report No:	21123164_P	Report date:	07/Nov./2020	Assessed By	Honglei Lu	
CONFIDENTIAL		All Rights Reserved			Page No:	4 of 21

## Section 1: Company Overview

Company Overview			
<b>1.1 Legal Validity</b>			
Does the company have a valid business license?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Business License Number:	Confidential
Year Established:	11/Jul./2019	Validity Period:	11/Jul./2019--31/Dec./2049
Export Experience:	2 years	Industry Experience:	2 years
Registered Address:	Confidential		
Company Address:	Confidential		
Annual review conducted by the Industrial & Commercial Bureau?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Reviewed By:	Confidential
Registered Capital:	RMB 10,000,000		
Corporate Representative:	Confidential		
Industry:	Steel		
Business Type:	<input checked="" type="checkbox"/> Manufacturer <input type="checkbox"/> Trading Company <input type="checkbox"/> Manufacturer & Trading Company		
Type of Ownership:	<input checked="" type="checkbox"/> Private Owner <input type="checkbox"/> Public Company <input type="checkbox"/> Joint Venture <input type="checkbox"/> Stated Owned <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other		
Products /Service:	Steel Pipe; Steel Plate		
<b>1.2 Company Building Information</b>			
Certification Type: <input type="checkbox"/> Land Certification <input type="checkbox"/> Real Estate Certification <input type="checkbox"/> Lease Agreement <input checked="" type="checkbox"/> Factory Officer Claimed			
Total Building Size: <u>5,000 m<sup>2</sup></u>			
Number of Building(s) : <u>2</u>			

## Section 2: Human Resources

Human Resources				
2.1 Company Chart				
 <pre> graph TD     GM[GM] --- ViceGM[Vice GM]     ViceGM --- Sales[Sales Dept.]     ViceGM --- Market[Market Dept.]     ViceGM --- Production[Production Dept.]     ViceGM --- Quality[Quality Dept.]     ViceGM --- Finance[Finance Dept.]     ViceGM --- Admin[Admin. Dept.]           </pre>				
2.2 Employee Headcount				
Department Name	Full Time Employee(s)	Part-Time Employee(s)	Total	
GM	1	0	1	
Vice GM	2	0	2	
Sales Dept.	3	0	3	
Market Dept.	2	0	2	
Production Dept.	56	0	56	
Quality Dept.	2	0	2	
Finance Dept.	2	0	2	
Admin. Dept.	3	0	3	
<b>Total Number:</b>	71	0	71	
2.3 Management				
Department	Name	Title	Education	Year(s) in Current Company
Confidential	Confidential	Confidential	Confidential	Confidential

### Section 3: Production Capacity

Production Capacity				
<b>3.1 Annual Production Capacity (Previous Year)</b>				
Confidential				
<b>3.2 Production Capacity</b>				
Product Name	Production Line Capacity	Actual Units Produced (Previous Year)		
Steel Pipe; Steel Plate	36,000 Tons Per Year	Confidential		
<b>3.3 Production Machinery</b>				
Machine Name	Brand & Model No.	Quantity	Number of Year(s) Used	Condition
Laser cutting machine	Confidential	1	2	Good
Bending machine	Confidential	2	2	Good
Shot blasting machine	Confidential	1	2	Good
<b>3.4 Testing Machinery</b>				
Machine Name	Brand & Model No.	Quantity	Number of Year(s) Used	Condition
N/A	N/A	N/A	N/A	N/A
<b>3.5 Subcontractors</b>				
Subcontractor Name	Product Subcontracted	Volume Supplied	Cooperation Period (Years)	
N/A	N/A	N/A	N/A	
<b>3.6 Average Sampling Time</b>				
Product Category		Lead Time		
N/A		N/A		
<b>3.7 The Shortest Sampling Time</b>				
Product Category		Shortest Lead Time		
N/A		N/A		

## Section 4: Quality Assurance

Quality Assurance				
<b>4.1.1 Quality Management System Certification</b>				
Certification	Certified By	Certificate No.	Business Scope	Validity Date
N/A	N/A	N/A	N/A	N/A
<b>4.1.2 Product Certification</b>				
Certification	Certified By	Certificate No.	Product Name & Model No.	Validity Date
N/A	N/A	N/A	N/A	N/A
<b>4.2 Testing Report</b>				
Certification	Certified By	Certificate No.	Product Name & Model No.	Validity Date
N/A	N/A	N/A	N/A	N/A
<b>4.3 Quality Control Management</b>				
Item	Content	Observations /Comments		
4.3.1	Is there quality control on all production lines?	<input checked="" type="checkbox"/> Yes, all production lines have adequate quality control <input type="checkbox"/> Yes, some production lines have adequate quality control <input type="checkbox"/> No		
4.3.2	Do the QA/QC inspectors work independently from the production line?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4.3.3	Who does the QC/QA Manager /Supervisor report to?	Confidential		
4.3.4	How many QA/QC inspectors in total?	2		
No. of Employees in Each Production Line:				
Production Line	Supervisor	No. of Operators	No. of In-line QC/QA	
Workshop	3	53	2	
<b>4.3.5 Average Guarantee Time</b>				
Product Category		Guarantee Time		
Steel Pipe; Steel Plate		10 years		
<b>4.3.6 The Longest Guarantee Time</b>				
Product Category		Guarantee Time		
Steel Pipe; Steel Plate		10 years		
<b>4.4 Supplier Management</b>				
Item	Content	Observations /Comments		
4.4.1	Does the company have a supplier assessment procedure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		



4.4.2	Does the company have an updated list of approved suppliers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.4.3	Has the company established and implemented a standard procedure for purchasing contract review and approval?	<input checked="" type="checkbox"/> Yes, with written standard procedures <input type="checkbox"/> Yes, with written procedure but lack of consistent standard <input type="checkbox"/> No
4.4.4	Does the company keep its supplier assessment reports?	<input checked="" type="checkbox"/> Yes, assessment reports are available for more than 3 years <input type="checkbox"/> Yes, assessment reports are available for the last 1-3 years <input type="checkbox"/> Yes, assessment reports are available for the previous 12 months <input type="checkbox"/> No
4.4.5	Are the company's purchasing documents sufficient to ensure product safety control and their customers' requirements?	<input checked="" type="checkbox"/> Yes, the purchasing document includes all the information required <input type="checkbox"/> Yes, however the purchasing document includes incomplete information <input type="checkbox"/> No
4.4.6	Is there a procedure to conduct random product inspections after final packaging?	<input checked="" type="checkbox"/> Yes, with clear standard and written inspection records <input type="checkbox"/> Yes, with inspection records but no procedures <input type="checkbox"/> Yes, with procedures but no inspection records <input type="checkbox"/> No, inspections are not necessary

**4.5 After Sales Service**

Item	Content	Observations /Comments
4.5.1	Is customer feedback, including complaints, clearly recorded and maintained?	<input checked="" type="checkbox"/> Yes, with a standard feedback form and records <input type="checkbox"/> Yes, with a standard feedback form but no records <input type="checkbox"/> Yes, with records but no standard feedback form <input type="checkbox"/> No
4.5.2	Are there any clear procedures for handling customer complaints?	<input checked="" type="checkbox"/> Yes, with clear procedures and written records <input type="checkbox"/> Yes, with clear procedures but no written records <input type="checkbox"/> Yes, with written records but no clear procedures <input type="checkbox"/> No
4.5.3	Is there a closed-loop corrective action system in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.5.4	Can finished/package products be traced by lot identification to the appropriate raw material test reports?	<input checked="" type="checkbox"/> Yes, with procedures to trace raw materials <input type="checkbox"/> Yes, main raw material can be traced

Report No:	21123164_P	Report date:	07/Nov./2020	Assessed By	Honglei Lu	
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		<input type="checkbox"/> No, only the production date can be traced <input type="checkbox"/> No
4.5.5	Is there a product alert and recall procedure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

## Section 5: Production Process Management

Quality Control Management		
Item	Content	Observations /Comments
5.1	Is the factory tidy and clean enough for production?	<input checked="" type="checkbox"/> Yes, very good <input type="checkbox"/> Yes, acceptable <input type="checkbox"/> No, needs improvement <input type="checkbox"/> No, very poor
5.2	Are the following items /documents provided at the appropriate location?	<input checked="" type="checkbox"/> Work instructions <input checked="" type="checkbox"/> Approved sample <input type="checkbox"/> Product picture <input type="checkbox"/> No the above-mentioned was not available.
5.3	Are written instructions available for onsite material inspection/testing? Are the relevant records maintained?	<input checked="" type="checkbox"/> Yes, with clear written instructions and records <input type="checkbox"/> Yes, with written instructions but no records <input type="checkbox"/> Yes, with records but no written instructions <input type="checkbox"/> No
5.4	Are written inspection/testing instructions available for finished products? Are the relevant records maintained?	<input checked="" type="checkbox"/> Yes, with clear written instructions and records <input type="checkbox"/> Yes, with written instructions but no records <input type="checkbox"/> Yes, with records but no written instructions <input type="checkbox"/> No
5.5	How are finished products inspected?	<input checked="" type="checkbox"/> 100% of products with detailed inspection <input checked="" type="checkbox"/> Random inspection <input type="checkbox"/> No inspection <input type="checkbox"/> No inspection necessary
5.6	Are units that failed inspection clearly marked and separated to prevent accidental dispatch?	<input checked="" type="checkbox"/> Yes, the units are separated and marked clearly <input type="checkbox"/> Yes, the units are separated but not marked clearly <input type="checkbox"/> No
5.7	How are finished products that failed inspection handled?	<input checked="" type="checkbox"/> Repaired and re-inspected <input checked="" type="checkbox"/> Thrown away <input type="checkbox"/> No inspection necessary

## Section 6: R & D Capacity

R&D Capacity				
<b>6.1 Current Situation</b>				
There is/are <u>4</u> R&D engineer(s) in the company.				
Education Level	Headcount		Work Experience	Headcount
Doctorate	0		Over 30 Years	0
Post-Graduate	0		21-30 Years	0
Graduate	2		11-20 Years	2
Junior College	2		6-10 Years	2
Technical School	0		2-5 Years	0
High School	0		Less than 2 years	0
<b>Patent Situation</b>				
Patent No.	The Name of the Patent	The Patent Type	Available Date	
N/A	N/A	N/A	N/A	
<b>Brand Situation</b>				
Registration/application No.	Brand Name	For Approval to Use Goods	Validity Date	Ref.
N/A	N/A	N/A	N/A	N/A
<b>The Average Time For New Products Launched</b>				
Product Category		Lead Time		
Steel Pipe; Steel Plate		1 month		
<b>The Shortest Time For A New Item Launched</b>				
Product Category		Shortest Lead Time		
Steel Pipe; Steel Plate		1 month		
Does the company provide ODM service for others?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are there relevant design input/output, review, and verification documents available for the assessment company?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Based on inspection, are R & D employees equipped with adequate specialized equipment?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list all key equipment used:		Confidential		
Do R& D employees use any specific software for designing new products?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list the main software used:		Confidential		

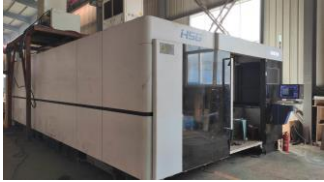





Please list all certifications and/or qualifications of the R & D department:	N/A
Has the company established standard design procedures for new products?	<input checked="" type="checkbox"/> Yes, with clear written instructions <input type="checkbox"/> Yes, without written instructions <input type="checkbox"/> No
Have the designed products been internal verified or validated?	<input checked="" type="checkbox"/> Yes, with clear written records <input type="checkbox"/> Yes, only part written records <input type="checkbox"/> Yes, without written records <input type="checkbox"/> No
Have the designed products been tested by a third-party inspection body?	<input checked="" type="checkbox"/> Yes, all designed products have been tested <input type="checkbox"/> Yes, only part of designed products have been tested <input type="checkbox"/> No
Are the designed products confirmed by the customers?	<input checked="" type="checkbox"/> Yes, all designed products have been confirmed <input type="checkbox"/> Yes, part of designed products have been confirmed according to client' s requirements <input type="checkbox"/> No
Does the company has qualification requirements for designers?	<input checked="" type="checkbox"/> Yes, with written job description <input type="checkbox"/> Yes, without written job description <input type="checkbox"/> No, but at least two years design experience is needed <input type="checkbox"/> No
Are the designers' qualifications recognized by the company?	<input checked="" type="checkbox"/> Yes, with written records <input type="checkbox"/> Yes, without written records <input type="checkbox"/> No
What level of design services are provided?	<input type="checkbox"/> Only add logo/change color/material <input type="checkbox"/> Sample processing <input type="checkbox"/> Graphic processing <input checked="" type="checkbox"/> Create an entirely new product
<b>6.2 R&amp;D Real Case Description</b>	
<b>Customer's Name</b>	Confidential
<b>Customer's Location</b>	Confidential
<b>Customer's Industry:</b>	Confidential
<b>Order's Requirement Description:</b>	Confidential
<b>6.3 Design Process (Confidential)</b>	
<b>6.4 Design Devices (N/A)</b>	



## Section 7: Company Development / Expansion Plans

Company Development / Expansion Plans		
Item	Company Development Action	Timeframe
1	Confidential	Confidential

## Section 8: Production Flow

Production Flow					
No	Production Process	No	Production Process	No	Production Process
1		2		3	
	Laser cutting		Bending		Shot blasting
4		5		6	
	Product finished		Warehouse		Loading







## Section 9: Certification & Photos

Certification & Photos	
<b>Certification &amp; Photos -- Business License</b>	<b>N/A</b>
<p><b>Business License (Original)</b></p> <p>has already been verified, keeping secret according to the supplier's request</p>	<p>N/A</p>
<b>Patent Photos (N/A)</b>	
<b>Product Certification Photos (N/A)</b>	
<b>Quality Management System Certification Photos (N/A)</b>	
<b>Testing Report Photos (N/A)</b>	
<b>Trademark Photos (N/A)</b>	



## Section 10: Company and Product Samples

Company and Product Samples	
<p><b>Factory Building</b></p> 	<p><b>Workshop</b></p> 
<p><b>Warehouse</b></p> 	<p><b>Product Sample</b></p> 

**Section 11: Competitive Advantages**

11.1 Product Group Capacity					
<b>11.1.1 Products Sold (Within 12 Months)</b>					
Products Name	Quantity	Revenue (USD)			
N/A	N/A	N/A			
<b>11.1.2 Suppliers Cooperated With (Within 12 Months)</b>					
No. of cooperation suppliers (total)		N/A			
No. of suppliers (which cooperated over 2 times)		N/A			
No. of provinces which cooperation suppliers belong to		N/A			
Would the company like to provide design solution service for integration project?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, these projects include		N/A			
Would the company like to provide a total solution for purchasing?		<input type="checkbox"/> Yes <input type="checkbox"/> Part, _____ <input checked="" type="checkbox"/> No			
If yes, please describe it		N/A			
<b>11.1.3 Real Case Description:</b>					
Customer Name		N/A			
Customer Country		N/A			
Customer Region		N/A			
Products Category		N/A			
Order Value (USD)		N/A			
Order Processing Process		N/A			
Customer's Feedback		N/A			
<b>11.2 Real Case for Lower MOQ &amp; Lead Time</b>					
Products Name	MOQ (Within 12 Months)	Lead Time			
Confidential	Confidential	Confidential			
<b>11.3 Real Case for Large Contract &amp; Lead Time</b>					
Products Name	Order (Within 12 Months)	Lead Time			
Confidential	Confidential	Confidential			
<b>11.4 Overseas After Sales Service Capacity</b>					
11.4.1 Do you have an overseas onsite service center?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
11.4.2 If yes, what onsite after-sales services are included		Location	Evidence- provided	Self-description	
Equipment -installation, maintenance and other services		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A	N/A	N/A	
Technical advice		<input type="checkbox"/> Yes N/A	N/A	N/A	
Report No:	21123164_P	Report date:	07/Nov./2020	Assessed By	Honglei Lu
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	<input checked="" type="checkbox"/> No			
Personnel training	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A	N/A
Other:		N/A	N/A	N/A
<b>11.4.3 Average Response Time</b>	6hours			
<b>11.5 After-sales service capacity</b>				
Does the company accept small order?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			





## Section 13: Supply chain capability

13.1 Centralized procurement	
In the past 12 months, have you sold products from at least three sub-categories?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
13.2 Overseas warehouse	
Do you have an overseas warehouse?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Country/Region	N/A

-- End of Report --