



**Silicon Graphics, Inc.**  
COP11087 Rev 005

# Supplier Pre-Business Certification

**Completed By:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**FAX Number :** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

## Instructions:

1. Complete all sections of the following certification, which apply to your company.
2. Sections which do not apply to your company mark as “Not Applicable” or N/A.
3. Information that is deemed “Confidential or Proprietary” to your company should not be provided on this form unless your company wishes to submit confidential information and is willing to sign a SGI Non-Disclosure agreement (NDA). Your SGI representative can provide this document and work with your company to put an “NDA” in place.
4. Completion of this form is not a guarantee that SGI will approve your company as a Supplier or Contractor for SGI, and is intended to provide reviewing SGI personnel basic information for further consideration of your company as a Supplier for SGI.
5. If you have any questions please contact your SGI representative conducting this certification.



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# Supplier Pre-Business Certification

Date Completed: \_\_\_\_\_ Completed By: \_\_\_\_\_

NOTE: Silicon Graphics, Inc. appreciates your timely and complete response to our "Supplier Certification Request". As a commercial sub-contractor, SGI is required by Federal Law to verify the business categories of all of its Suppliers.

## 1.0 General Business Information: (Must Be Completed by All Applicants)

1.1 Company/Supplier Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_  
Federal Tax ID or Social Security Number (If Applicable): \_\_\_\_\_

1.1.1 Is this your companies corporate address? Y/N

NOTE: If your company is a division or subsidiary of a larger corporation please complete a separate certification form designating the name of the parent company. For the parent company you should only complete the "General Business" section of the certification for submission.

1.2 Are there other locations for this company other than the address above? Y/N  
If so please list on a separate form and submit to your Sgi contact.

1.3 Type of Business: (DBA or Doing Business As a?) \_\_\_\_\_

(1) Corporation \_\_\_\_ (2) \*Partnership\_\_\_\_ (3) \*Sole Proprietorship\_\_\_\_  
(4) Other\_\_\_\_\_

Note: \* Requires Principal Officer's Social Security Numbers

1.4 Is your company foreign owned?\_\_\_\_\_ Which Country?\_\_\_\_\_

1.5 Is your company affiliated with a "Union" or is it "Non-Union"?

1.5.1 If company is "Union" please provide affiliation, and date that the contract expires? \_\_\_\_\_

1.6 Total number of employees within this business?\_\_\_\_\_

1.7 Names of Company Officers & Titles:

President/CEO: \_\_\_\_\_

Chief Financial Officer: \_\_\_\_\_

Sr. VP of Sales/Marketing: \_\_\_\_\_

Chief Operating Officer: \_\_\_\_\_



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## 1.0 General Information (Cont'd):

1.8 Key Contact at your company:

Sales Representative: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ FAX No.: \_\_\_\_\_

1.9 Please indicate which of the following best describes this business?

Manufacturer/OEM	_____	Reseller	_____
Contract Manufacturer	_____	Manufacturers Rep.	_____
Wholesale Distributor	_____	Other	_____
Contractor	_____		

Description of Product or Services Provided? \_\_\_\_\_

## 2.0 Diversity: (Supplier Certification Request)

2.1 \*Is your company considered a "Small" business? Yes \_\_\_\_ No \_\_\_\_

2.2 Is your company a minority owned business? Yes \_\_\_\_ No \_\_\_\_

2.2.1 African American? \_\_\_\_\_

2.2.2 Hispanic American? \_\_\_\_\_

2.2.3 Asian Pacific American? \_\_\_\_\_

2.2.4 Native American? \_\_\_\_\_

( Persons having origins in any of the original peoples of North America of the Hawaiian Island, in particular, American Indians, Eskimos, Aleuts, and Native Hawaiian.)

2.2.5 Subcontinent Asian American? \_\_\_\_\_

(Origins from India, Pakistan, Bangladesh, Sri Lanka, Bhutan or Nepal)

2.3 Is your company "Women" owned (Defined as 51% owned, operated, and controlled ownership)? \_\_\_\_\_

2.4 Is your company owned by a U.S. Veteran? \_\_\_\_\_

2.5 Is your company owned by a U.S. service disabled Veteran? \_\_\_\_\_

2.6 Is your company certified by the SBA as a Small Disadvantaged Business (SDB)? Y/N

2.7 \*\*Is your company located in a "HUBZone"? \_\_\_\_\_

2.8 What is your company's "North American Industry Classification System" (NAICs) code? (Required) \_\_\_\_\_

(NOTE: Reference NAIC's website <http://www.census.gov/epcd/www/naics.html> to find your number.



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## 2.0 Diversity (Cont'd): (Supplier Certification Request)

**NOTE:** Signing below is acknowledgement that you are a company official and that all information is correct. Under the Federal Code of Regulations 15 U.S.C. 645(d), and any person who misrepresents a firm's status as a Small Business Concern in order to obtain a contract to be awarded under the preference programs established pursuant to sections 8(a), 8(b), 9 or 15 of the Small Business Act or any other provisions of Federal Law that specifically references Section 8(b) for a definition of Program eligibility shall: 1) be punished by imposition of a Fine, Imprisonment or Both; 2) be subject to the Administrative Remedies, including Suspension and Debarment; and 3) be ineligible for participation in programs under the authority of the Act.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Small Business Definition:** Small Business is independently owned and does not have a major impact on a national basis on other companies doing the same kind of business. For further reference see 13 CFR part 121, FAR part 19, or call your local U.S. Small Business Office, or visit website <<http://www.sba.gov>

**\*\*HUBZone Definition:** A HUBZone company is a small business located in a "historically under utilized business zone"; is operated and controlled by U.S. citizens, and 35% of its employees reside in the HUBZone and is certified by the Small Business Administration.



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### 3.0 Financial Information:

- 3.1 Is this a publicly, or privately held business? \_\_\_\_\_
- 3.2 What is your Company's projected gross Sales Revenue for this year? \_\_\_\_\_
- 3.3 What was last years gross Sales Revenue? \_\_\_\_\_
- 3.3.1 What percentage of your Company's revenue is designated for Research & Development? \_\_\_\_\_
- 3.4 Is your company listed with the Securities Exchange Commission? \_\_\_\_\_
- 3.5 Is your companies stock traded on one of the following markets?
- 3.5.1 New York Stock Exchange? \_\_\_\_\_
- 3.5.2 NASDAQ? \_\_\_\_\_
- 3.5.3 American Stock Exchange? \_\_\_\_\_
- 3.5.4 Any Foreign Stock Exchange? \_\_\_\_\_
- 3.6 Please provide Bank or credit references? (Please list below)
- 3.6.1 \_\_\_\_\_
- 3.6.2 \_\_\_\_\_
- 3.6.3 \_\_\_\_\_
- 3.7 Please list your top five customers and percentage of your company's business?
- 3.7.1 \_\_\_\_\_ % of bus. \_\_\_\_\_
- 3.7.2 \_\_\_\_\_ % of bus. \_\_\_\_\_
- 3.7.3 \_\_\_\_\_ % of bus. \_\_\_\_\_
- 3.7.4 \_\_\_\_\_ % of bus. \_\_\_\_\_
- 3.7.5 \_\_\_\_\_ % of bus. \_\_\_\_\_
- 3.8 Do you have an assigned Dun & Bradstreet number? \_\_\_\_\_ (Include #)
- 3.9 What are your "Standard" payment terms for customers? \_\_\_\_\_
- 3.9.1 Does your company offer other payment terms (2% 10 N30, N45, etc. Please designate which terms)? \_\_\_\_\_
- 3.10 Are you licensed to collect California and Wisconsin State sales tax? \_\_\_\_\_
- 3.11 Does your company require any special payment requirements or "Letters of Credit?"  
Y/N? \_\_\_\_\_ Please specify! \_\_\_\_\_



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## 4.0 Facilities:

- 4.1 How many owned buildings does your company have? \_\_\_\_\_  
Leased Buildings? \_\_\_\_\_
- 4.1.1 What is the total square footage of office space? \_\_\_\_\_  
4.1.2 What is the total square footage of manufacturing space? \_\_\_\_\_  
4.1.3 What is the total square footage of warehouse space? \_\_\_\_\_
- 4.2 What percentage of buildings are equipped with fire alarms? \_\_\_\_\_  
Fire sprinklers? \_\_\_\_\_
- 4.3 Does your company's buildings have security alarms? \_\_\_\_\_
- 4.4 Does your company contract with a private security services? \_\_\_\_\_
- 4.5 Does your company contract with a private janitorial services? \_\_\_\_\_
- 4.6 Does your company maintain "Confidential Disclosure Agreements" with contracted services in 4.4 and/or 4.5 above? \_\_\_\_\_
- 4.7 Does your company maintain a documented "Disaster Recovery Program" in case of a major disaster? \_\_\_\_\_  
4.7.1 If you sub-contract your company's products or processes, does your sub-contractor's maintain a "Disaster Recovery Program"? Y/N
- 4.8 What major disaster/events are your company's facilities at risk with? (Earthquakes, Floods, Hurricanes, Fires, Riots, Political Unrest)? \_\_\_\_\_
- 4.9 Does your company maintain a backup power source/s at its facilities?

## 5.0 Development and Manufacturing:

- 5.1 Does your company have a separate Research and Development Organization or department? \_\_\_\_\_  
5.1.1 Is Research and Development in the same facility with Manufacturing? \_\_\_\_\_  
5.1.1.1 If not where is this organization located? \_\_\_\_\_
- 5.1.2 R&D consists of how many Electrical/Electronic engineers? \_\_\_\_\_  
5.1.3 How many Mechanical engineers? \_\_\_\_\_  
5.1.4 How many Software engineers? \_\_\_\_\_  
5.1.5 Does your company maintain a separate "Proto-type" area? Y/N  
5.1.6 Does your company maintain a model or tool shop? Y/N
- 5.2 Does your company have the ability to produce CAD drawings? \_\_\_\_\_  
5.2.1 What brand of CAD hardware does your company use? \_\_\_\_\_  
5.2.2 What versions of CAD software does your company use? \_\_\_\_\_  
5.2.3 What is your company's preferred transfer capability? (IGS), (DFX), (PDM)? \_\_\_\_\_



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### 5.0 Development and Manufacturing: (Cont'd.):

- 5.3 Does your company maintain a separate manufacturing facility? \_\_\_\_\_
  - 5.3.1 Where is this facility located? \_\_\_\_\_
  - 5.3.2 How many employees at this facility? \_\_\_\_\_
  - 5.3.3 How many of these employees are permanent? \_\_\_\_\_ Temporary? \_\_\_\_\_
  - 5.3.4 Is this facility owned by the your company or is it leased? \_\_\_\_\_
  - 5.3.5 How many work shifts does your manufacturing department work? \_\_\_\_\_
  - 5.3.6 Does your company have manufacturing shutdowns during the year? Y/N
    - 5.3.6.1 Please list those dates? \_\_\_\_\_
  
- 5.4 Does your company "Outsource" or sub-contract some or all of your products? Y/N
  - 5.4.1 If this Supplier uses Contract Manufacturers please indicate the name or names and Address of that/those Suppliers? \_\_\_\_\_
  
- 5.5 How many manufacturing engineers are employed at your company? \_\_\_\_\_
  
- 5.6 What business database is used to run your company's business? \_\_\_\_\_
  
- 5.7 Does your company maintain an automated "shop floor control system"?
  
- 5.8 Does your company have the ability to install EDI or a Web Based "Order Entry" process, and/or an automated invoicing tool? \_\_\_\_\_
  
- 5.9 Is your company's manufacturing facility/s near a major airport? Rail head? Seaport? \_\_\_\_\_
  
- 5.10 Will SGI's products be manufactured on a separate dedicated production line or combined with other customers orders on a standard production line? \_\_\_\_\_
  
- 5.11 Please list your company's key manufacturing capabilities? \_\_\_\_\_
  
- 5.12 Does your company have the ability to package and use automated "Bar Coding" in labeling shipments? \_\_\_\_\_



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## 6.0 Quality:

6.1 Please list the name of the individual responsible for Quality at your company, and his or her title? \_\_\_\_\_

6.2 Does your company maintain a "Quality Control Process Manual"? \_\_\_\_\_

6.2.1 What is the date of the last revision of this manual? \_\_\_\_\_

6.2.2 Is your company willing to provide Sgi with a version of this manual in the "English Language"? Y/N \_\_\_\_\_

6.3 Is your company ISO certified? \_\_\_\_\_

6.3.1 What level/s of certification has Supplier achieved? \_\_\_\_\_

6.3.2 When was the date of certification or last re-certification? \_\_\_\_\_

6.3.3 What registrar certified your company? \_\_\_\_\_

6.4 Does your company have an "Incoming" inspection area or department? \_\_\_\_\_

6.4.1 Is there a separate area for discrepant material? \_\_\_\_\_

6.4.2 Is material identified and tagged as discrepant? \_\_\_\_\_

6.4.3 Is material RMA'd back to vendors or reworked? \_\_\_\_\_

6.5 Is there a training program for all manufacturing employees? \_\_\_\_\_

6.5.1 Are documented records kept for each employee? \_\_\_\_\_

6.5.2 Are employees required to have regular re-certification for specific operations? \_\_\_\_\_

6.6 Does your company use Statistical Process controls (SPC), or some other statistical methods for monitor manufacturing quality? (Explain) \_\_\_\_\_  
\_\_\_\_\_

6.7 How many Quality Engineers are assigned to your company's manufacturing area? \_\_\_\_\_  
\_\_\_\_\_

6.8 Does this Supplier calibrate all manufacturing, test, and measurement equipment on a regular basis? \_\_\_\_\_

6.8.1 Is calibration done by your company or an outside source? \_\_\_\_\_

6.8.2 If an outside source is used, please provide name of company? \_\_\_\_\_  
\_\_\_\_\_



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## 6.0 Quality (Cont'd):

6.8.3 Does your company maintain documentation on calibrated equipment?  
\_\_\_\_\_

6.9 Does your company conduct "EMI" (Electronic Emission Controls) testing for products, or is this done through a sub-contractor? \_\_\_\_\_

6.9.1 Does your company maintain documentation on product "EMI" testing? \_\_\_\_\_  
\_\_\_\_\_

6.10 Does your company have an "Electro Static Discharge (ESD)" program in place? Y/N

6.11 Does your company maintain records on products for UL and CE compliance? \_\_\_\_\_

6.11.1 What other agency/safety records are maintained by your company? \_\_\_\_\_  
\_\_\_\_\_

6.12 Does your company maintain MTBF (Mean Time Before Failure) records on products? \_\_\_\_\_

## 7.0 Environmental

SGI maintains an Environmental Policy that specifically states *SGI will ensure that suppliers agree to comply with environmental regulations*. SGI reserves the right to request additional information about your activities, products, or services that pertains to our Environmental Management System. Please complete the following:

7.1 Please list the name of the individual responsible for environmental issues at your company, and his or her title? \_\_\_\_\_

7.2 Does your company maintain written environmental protection and/or compliance programs(s)? \_\_\_\_\_ Please attach the Table of Contents.

7.3 Is your company ISO 14001 certified? \_\_\_\_\_ When was the date of certification or last re-certification? \_\_\_\_\_

7.4 Do the products your company will provide to SGI contain any hazardous materials? \_\_\_\_\_ If so, please complete and submit an Environmental Assessment & Declaration.



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7.5 Please describe the packaging your product(s) will be delivered in, including an estimate of the weight of the packaging per article:

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**8.0 Safety**

8.1 Please list the name of the individual responsible for health and safety issues at your Company and his/her title:\_\_\_\_\_

8.2 Does your company maintain written health and safety programs?\_\_\_\_\_ Please attach a list of those programs

8.3 What is your companies Experience Modifier for the last three years?  
1999\_\_\_\_\_ 2000\_\_\_\_\_ 2001\_\_\_\_\_

8.4 Have you had any work related fatalities at your company? If yes, how many and when?\_\_\_\_\_

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8.5 Have you had any OSHA citations? If yes, please note the nature and the fine.

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8.6 What is your Lost Work Day Rate for the past three years?  
1999\_\_\_ 2000\_\_\_ 2001\_\_\_

8.7 What is your Recordable Injury and Illness Rate for the past three years?  
1999\_\_\_\_\_ 2000\_\_\_\_\_ 2001\_\_\_\_\_

8.8 Are you sending shipping any Hazardous Materials to our facility\_\_\_\_\_ If so, you are required to include a Material Safety Data Sheet.