

# Vendor Capability Assessment

Date: [Insert Date]

To: [Vendor Name]

Address: [Vendor Address]

Dear [Vendor Contact Name],

We are conducting a Vendor Capability Assessment to evaluate your capabilities and services. This assessment will help us understand your strengths and how you align with our business needs.

## Assessment Criteria

- Product Quality
- Service Delivery
- Pricing Structure
- Compliance and Certifications
- Customer Support
- Previous Experience and References

Please provide detailed responses to the following questions:

1. Describe your product offerings and their unique features.
2. What is your typical lead time for delivery?
3. Can you provide references or case studies from past clients?
4. What certifications do you hold relevant to our industry?
5. How do you handle customer complaints and support?

We kindly request that you send your responses by [Insert Deadline]. This will enable us to proceed with the evaluation process in a timely manner.

Thank you for your cooperation. We look forward to your prompt response.

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Your Contact Information]