

Supplier Resource Assessment

Date: [Insert Date]

To: [Supplier Name]

Address: [Supplier Address]

City, State, Zip: [City, State, Zip]

Contact Person: [Contact Person Name]

Contact Email: [Contact Email]

Contact Phone: [Contact Phone]

Dear [Supplier Name],

We appreciate your partnership and value your contributions to our supply chain. As part of our ongoing commitment to excellence, we are conducting a resource assessment of our suppliers.

We kindly request that you provide us with information regarding your operational capabilities, resources, and any certifications you hold. Please include the following details:

- Overview of production capacities
- List of key resources and equipment
- Certifications and compliance documents
- Staff qualifications and training programs
- Any recent changes to your operations

We believe this assessment will help us ensure that we continue to meet quality standards and foster a stronger partnership. Please submit the requested information by [Insert Deadline Date].

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Your Contact Information]