1. organisation profile

|  |  |
| --- | --- |
| Will your organisation comply, if required, with Our Code and our Anti-Corruption policy? | Yes No |
| Will your organisation conform, if required, to our Quality, Safety and Environmental Management systems and site specific Quality, Safety and Environmental Plans? | Yes No |

|  |  |
| --- | --- |
| Registered Name |  |
| Postal Address |  |
| Post Code |  |
| ABN No. |  |
| Trading Name |  |
| Email Address |  |
| Name of Bank |  |
| BSB |  |
| Account Number |  |
| Type of Organisation (Pty Ltd, Public Ltd, Partnership/Sole Trader) |  |
| Number of Employees |  |

Please provide contact details within your Organisation

|  |  |  |  |
| --- | --- | --- | --- |
| Position | Name | Telephone | Email Address |
| Manager |  |  |  |
| Sales/Estimating |  |  |  |
| Production/Construction |  |  |  |
| Accounts |  |  |  |

Who is your contact for the Company?

|  |  |
| --- | --- |
| Contact Name |  |

Does your organisation have a minimum of 25% indigenous ownership? Yes No

2 industry classification

Select your Organisations primary business

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Accommodation & Diners |  | Business Services |  | Construction |  |
| Cultural & Recreational Services |  | Education & Training |  | Finance & Insurance |  |
| Health & Community Services |  | Information Tech & Comm |  | Mining |  |
| Manufacturing |  | Plant & Equipment |  | Retail Trade |  |
| Transport & Storage |  | Wholesale Trade |  | Other (please specify) |  |

Please detail your Organisation’s Work Type, i.e. if Construction, the Work Type may be concreting, or drilling etc.

|  |
| --- |
|  |
|  |

3 legal

Has your Organisation been prosecuted by a regulatory body? Yes No

If Yes, please provide further information

|  |
| --- |
|  |
|  |

Is your Organisation involved in any bankruptcy or reorganisation proceedings? Yes No

If Yes, please provide further information

|  |
| --- |
|  |
|  |

4 references

Provide contact information for your current or previous 3 jobs

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Referee 1 | Referee 2 | Referee 3 |
| Client Name |  |  |  |
| Contact Name |  |  |  |
| Contact Details |  |  |  |
| Fax Number |  |  |  |
| Email Address |  |  |  |
| Value $ |  |  |  |

5 insurances

Please complete and supply copies of current certificates of insurances in ALL INSTANCES

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Insurance Type | Insurer | Policy Number | Expiry Date | Value |
| Workers Comp |  |  |  |  |
| Professional Indemnity |  |  |  |  |
| Public Liability |  |  |  |  |
| Motor Vehicle |  |  |  |  |
| Other - Marine Cargo Ins |  |  |  |  |

6 registrations and licences

Provide details of, and expiry dates of all statutory Registrations and Licences held by your Organisation for example: Builders, Classified Plant, Painters, Registrations, Plumbing, Electrical, Gas, Dangerous Goods, Radiation, Explosives, Dewatering, Demolition Licences, etc.

|  |  |  |  |
| --- | --- | --- | --- |
| S. No | Registration Type | Registration Number | Expiry Date |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |

Provide details of licences

|  |  |  |  |
| --- | --- | --- | --- |
| S. No | Licence Type | Licence Number | Expiry Date |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |

Declaration

On behalf of our Organisation, I hereby certify that the information provided in this questionnaire is an accurate reflection of our Organisation and we will provide appropriate documented evidence if requested. I also confirm access will be permitted to our Organisation premises for audit if requested.

|  |  |
| --- | --- |
| Name of Organisation |  |
| Name of Authorised Signatory |  |
| Position |  |
| Date |  |
| Signature |  |

For office use only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Assessor |  | Date |  | |
| Signature |  | Rating | Approved | Review |
| Comments |  | | | |

Commercial Manager/System Manager approval:

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Date |  |
| Signature |  | | |