

**The University of Newcastle**

**Commercial Services**

Capital Works Supplier Registration Programme

**Guidelines**

**Conditions**

**Application Form**

**Commercial Services**

**The Chancellery/University of Newcastle**

**University Drive, Callaghan NSW 2308**

Issue Date August 2013

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# Introduction

The aim of the University’s Supplier Registration Programme is to ensure that the University obtains information from the market as to the capability, experience, qualifications and contact details of Suppliers.

Suppliers to the University are to satisfy the following criteria:

* High quality
* Cost efficiency
* Precise delivery
* Strive for long-term partnership.

As part of the Supplier Registration process, Suppliers will need to maintain the currency of their information provided to the University.

Whilst it is the aim of the University is that Suppliers chosen to participate in Tender / Quotation processes are sourced from Registered Supplier Programme, it does not remove the ability for the University to invite participation in a Tender / Quotation process from Suppliers who are not Registered with the University, should it be deemed commercially prudent to do so.

Suppliers are also subject to on-going review by the University to ensure that the information submitted in their application remains valid and that they have performed satisfactorily when awarded contracts.

Supplier performance is evaluated on the basis of the following criteria:

PRICE

* price standard, price behaviour, price content, invoicing.
* requirement for excellent qualification: allowances, discounts.

QUALITY

* quality assurance.
* compliance with health, safety and environment protection criteria.
* compliance with rules and standards in connection with the supplied material / product / service.
* requirement for excellent qualification: operation of a certified quality management system.

SUPPLY / SERVICE ABILITY

* observation of deadlines
* quantity match / deviation
* packaging requirements (identification, damage, etc.)

CUSTOMER SATISFACTION

* experience in pro-active co-operation
* flexibility, reaction
* requirement for excellent qualification: proposals for new solutions that are favourable to the University.

# Registration Process

Registration is available for all categories of supply of products and services at the University’s discretion. The diagram below represents the indicative registration process.



\*The University will review the ongoing RFx performance of Suppliers. Where Suppliers consistently fail to demonstrate value for money in their submission those Suppliers may be removed from the Supplier Registration Programme.

# Application for registration

Suppliers are invited to apply for registration by completing and submitting a registration form with relevant supporting information.

The information should be clearly labelled and be of sufficient detail to enable full understanding of the capabilities and previous experience of the supplier. Suppliers should be aware that additional information may be requested by the University as part of the registration process.

Registrations must be forwarded by e-mail to: [Commercialservices@newcastle.edu.au](mailto:Commercialservices@newcastle.edu.au)

# Notification

Registration information will be entered into the University’s supplier information database. The University may undertake investigations as necessary in order to assess performance (such as Audit Reports and Performance Reports) and interview the Supplier to clarify registration details.

The registration of a Supplier does not extend to a related or subsidiary supplier owned or controlled by the Supplier.

# Selection for Tendering

Supplier registration will not guarantee inclusion in a tender process. Invitation to tender will be determined by meeting project specific selection criteria based on experience and capacity.

# Sustaining Registration

The University will assess a Supplier through tendering and contract performance. Matters taken into account in the assessment of a Supplier’s performance may include:

* quality and competitiveness of RFx proposals
* standard of work and performance
* compliance with agreed pricing
* additional cost savings or value adding provided by the supplier over the life of the contract
* Quality Management System and quality assurance in contract performance
* compliance with Occupational Health, Safety and Welfare or Rehabilitation requirements
* compliance with Equal Opportunity requirements
* managerial performance (including management and supervision of personnel and sub-contractors, and effective site and industrial relations management)
* adherence to contract provisions
* approach to co-operation and partnering with the University

**The University may review a Supplier’s registration if it becomes aware of:**

* unsatisfactory performance of University or other contracts;
* Substantial adverse change in a Supplier’s technical, financial, managerial, or organisational capability;
* Supplier being placed into voluntary administration or involved in a compromise or other arrangement with creditors.

The University may, in its absolute discretion, remove a Supplier from the Supplier Registration Programme. The Supplier will be given details of the matters prompting this decision. The University may make revisions to the programme, or seek new applications at any time. Whenever a full revision of the programme is carried out, additional information or new applications from currently registered Suppliers may be sought.

# Suppliers to advise the University

Registered Suppliers are required to submit details to allow updating of their registration upon any significant changes in their business including any significant change to;

* Financial or technical capacity
* Ownership or holding
* Any convictions or prohibition notices under OHS&W or environmental legislation
* Significant changes to the range of products or services offered
* Address, phone, e-mail or facsimile numbers
* Substandard changes to quality accreditation
* Changes to levels of insurance

# Confidentiality

Except as required by law, the University will ensure the confidentiality of all information provided by Suppliers and will sign an appropriate confidentiality agreement if requested.

# Disclaimer

The decision to approve or reject, with or without conditions, any registration application or for rescission or suspension of registration is at the absolute discretion of the University. The University is not liable for any costs or damage incurred in the exercise of such discretion or the discretion to rescind or suspend any registration. The Supplier Registration Programme is developed for the University’s internal purposes. The University does not represent or warrant that any of its registered Suppliers are technically capable or financially sound or have any other characteristics. Any person or company seeking to deal with a Supplier who is registered with the University must rely on their own enquiries.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Supplier Registration **Capital Works** | | | | |
| Part 1 – General Information | | | | |
| **Business Name** |  | | | |
| **Trading as** |  | | | |
| **Date Established** |  | | | |
| **Australian Company Number** | **ACN** |  | | |
|  | **ABN** |  | | |
| **Address of Office**  ***Responsible for tenders*** |  | | | |
|  |  | | | |
| **Postal Address**  ***Responsible for tenders*** |  | | | |
|  |  | | | |
| **Contact Person Name** |  | | | |
| **Position In Company** |  | | | |
| **Email Address** |  | | | |
| **Telephone** |  | | | |
| **Mobile** |  | | | |
| **Business Type (Please tick)** | Sole Trader | Partnership | | Limited Liability |
|  | Public Organisation | Other – Please Specify: | | |
| **Consultancy** | Quantity Surveyor | | Construction Project Management | |
|  | Geotechnical | | Other – Please Specify: | |
| **Building Engineering Design Services** | Architectural | | Civil/Structural Engineering | |
|  | Communications / IT | | Electrical/Lighting | |
|  | Fire | | Hydraulic | |
|  | Mechanical | | Security | |
|  | Other – Please Specify: | | | |
| **Capital Works Building (Construction)** | Construction (New Build) | | Construction (Refurbishment Works) | |
| **Project Value Range (Please tick)** | less than $100,000 | >$100,000 <$500,000 | | >$500,001 <$1 M |
|  | >$1 M <$5 M | >$5 M <$10 M | | greater than $10 M |
|  | Other – Please Specify | | | |

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| Part 2 – Organisation Resources | | | | | |
| **Briefly describe your company capability (Max 200 words)** | | | | | |
|  | | | | | |
| **OFFICE LOCATIONS** | | | | | |
| Pleased provide a list of locations at which the organisation currently has staffed offices **(Australia only)** | | | | | |
| **Office Location** | | | **Street Address, Phone and Fax Numbers** | | |
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| **The University’s main campuses are located in Callaghan (Newcastle) and Ourimbah (Central Coast) in NSW. There are also regional locations that require servicing under University supply of goods & services. Identify your branch locations responsible for these areas.** | | | | | |
| **University Location** | **Branch Suburb** | **Address** | | **# of Staff** | **Head Office Suburb** |
| Callaghan, NSW |  |  | |  |  |
| Ourimbah, NSW |  |  | |  |  |
| Sydney, NSW |  |  | |  |  |
| Port Macquarie, NSW |  |  | |  |  |
| Orange, NSW |  |  | |  |  |
| Tamworth, NSW |  |  | |  |  |

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| **Identify Directors & Senior Managers who may be involved in the management of Works** | | | | | | |
| **Role** | **Name** | **Location** | **Yrs Industry Experience** | **Yrs With Company** | **Qualifications** | **CV Available (Y/N)** |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |
| 9. |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |
| 13. |  |  |  |  |  |  |
| 14. |  |  |  |  |  |  |
| 15. |  |  |  |  |  |  |

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| Part 3 – Supplier Experience & Performance | | | |
| **Please provide a list of recent engagements undertaken (within 5 years) in each of the Project Types as applicable. Only list projects completed by Offices listed in Part 2. In the last row please indicate if the National Code of Practice for the Construction Industry was applied to the nominated project.**  **Please only complete those sections relevant to the supplier type**  **If indicating expertise in multiple supplier types please specify what role(s) was performed in each engagement** | | | |
|  |  |  |  |
| **Education Facilities** | **Engagement 1** | | |
| **Name Of Engagement** |  | | |
| **Short description of work completed** |  | | |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Construction only)** | **Yes**  **No** | | |
|  | **If Yes, provide details:** | | |
| **Client** |  | | |
| **Project Value** |  | | |
| **Engagement Value** |  | | |
| **Start Date** |  | | |
| **End Date** |  | | |
| **National Code of Practice Applied? Y/N** |  | | |
| **Education Facilities** | **Engagement 2** | | |
| **Name Of Engagement** |  | | |
| **Short description of work completed** |  | | |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Construction only)** | **Yes  No** | | |
|  | **If Yes, provide details:** | | |
| **Client** |  | | |
| **Project Value** |  | | |
| **Engagement Value** |  | | |
| **Start Date** |  | | |
| **End Date** |  | | |
| **National Code of Practice Applied? Y/N** |  | | |
| **Education Facilities** | **Engagement 3** | | |
| **Name Of Engagement** |  | | |
| **Short description of work completed** |  | | |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Construction only)** | **Yes  No** | | |
|  | **If Yes, provide details:** | | |
| **Client** |  | | |
| **Project Value** |  | | |
| **Engagement Value** |  | | |
| **Start Date** |  | | |
| **End Date** |  | | |
| **National Code of Practice Applied? Y/N** |  | | |

|  |  |
| --- | --- |
| **General Purpose (Office Building)** | **Engagement 1** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **General Purpose (Office Building)** | **Engagement 2** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **General Purpose (Office Building)** | **Engagement 3** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| --- | --- |
| **Health / Scientific** | **Engagement 1** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
| **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| --- | --- |
| **Health / Scientific** | **Engagement 2** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Health / Scientific** | **Engagement 3** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| --- | --- |
| **Interior Fit Out/Refurbishment** | **Engagement 1** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Interior Fit Out/Refurbishment** | **Engagement 2** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| **Interior Fit Out/Refurbishment** | **Engagement 3** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| **Heritage** | **Engagement 1** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Heritage** | **Engagement 2** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Heritage** | **Engagement 3** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| **Civil / Infrastructure Works** | **Engagement 1** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Civil / Infrastructure Works** | **Engagement 2** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Civil / Infrastructure Works** | **Engagement 3** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| **Residential/Accommodation** | **Engagement 1** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |

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| --- | --- |
| **Residential/Accommodation** | **Engagement 2** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied? Y/N** |  |
| **Residential/Accommodation** | **Engagement 3** |
| **Name Of Engagement** |  |
| **Short description of work completed** |  |
| **Were premises/area occupied during this engagement?**  **(for Capital Works Building only)** | **Yes  No** |
|  | **If Yes, provide details:** |
| **Client** |  |
| **Project Value** |  |
| **Engagement Value** |  |
| **Start Date** |  |
| **End Date** |  |
| **National Code of Practice Applied?** | Yes  No |

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| **National Code of Practice** |
| **For further information on the National Code of Practice suppliers should refer to the following:**  [**www.deewr.gov.au/WorkplaceRelations/Policies/BuildingandConstruction/Pages/default.aspx**](http://www.deewr.gov.au/WorkplaceRelations/Policies/BuildingandConstruction/Pages/default.aspx) |

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| Part 4 – Insurances | | | | |
| **Suppliers to provide insurance details. A full copy of each policy must be provided if requested by the University.** | | | | |
| **Insurance Type** | **Requirements** | **Policy No.** | **Expiry Date** | **Cover Value** |
| **Public and Product Liability** | Minimum $20 Million unlimited in aggregate |  | /  / | $ |
| **Workers Compensation** | As required under Statutory Obligations |  | /  / | $ |
| **Professional Indemnity**  **(Where required by Project Risk)** |  |  | /  / | $ |

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| Part 5 – Quality Management System | | | | | |
| **A satisfactory response to this section is required before an application will be considered**  **Please list 3rd party certification of Quality Management System.** | | | | | |
| **Does your firm operate a Quality Management System?** | | Yes  No | | | |
| **If answering ‘Yes’ to the above question, please provide further details below** | | | | | |
| **Please list 3rd party certification of Quality Management System** | | | | | |
| **Name of Certification** | **Year Obtained** | | **Expiry** | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
| **If your company is not 3rd party certified to AS/ANZ ISO 9001:2008, indicate if the following have been obtained, and by what means:** | | | **Yes / No** | **External Training or Qualification** | **Internal Process** |
| **Awareness of pertinent standards and codes of practice.** | | |  |  |  |
| **Commitment to continuous improvement of Quality Management System performance.** | | |  |  |  |
| **Procedures for monitoring the supplier Quality Management System performance and for investigation and corrective action in the event of any non-conformance, including for subcontractors.** | | |  |  |  |

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| Part 6 – Occupational Health Safety & Welfare System (WH&S) | | | | | | |
| **A satisfactory response to this section is required before an application will be considered**  **Please list 3rd party certification of WH&S System.** | | | | | | |
| **Does your firm operate an WH&S System?** | | Yes  No | | | | |
| **If answering ‘Yes’ to the above question, please provide further details below** | | | | | | |
| **Name of Certification** | **Year Obtained** | | | | **Expiry** | |
|  |  | | | |  | |
|  |  | | | |  | |
|  |  | | | |  | |
| **If your company is not 3rd party certified indicate if the following have been obtained, and by what means:** | | | **Yes / No** | **External Training or Qualification** | | **Internal Process** |
| **Documented WH&S Policy & System.** | | |  |  | |  |
| **Awareness of pertinent standards and codes of practice.** | | |  |  | |  |
| **Commitment to continuous improvement of WH&S performance.** | | |  |  | |  |
| **Procedures for monitoring WH&S performance and for investigation and corrective action in the event of an environmental non-conformance, including for subcontractors.** | | |  |  | |  |
| **Any reportable incidents or infringement notices under the WH&S Act has been issued in the last 2 years, and evidence that corrective action has been implemented.** | | | | | | |
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| Part 7 – Systems & Software, Accreditations, & Professional Memberships |
| **The University seeks information relating to systems and software (internal or industry standard) utilised by the Supplier and a list of systems accreditations and professional memberships held by the Supplier.** |
| **Systems & Software** |
|  |
| **Accreditations** |
|  |
| **Professional Memberships** |
|  |

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| Part 8 – Equal Opportunities | |
| **Does your organisation have a documented equal opportunities policy, to avoid discrimination?** | Yes  No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Part 9 – Environmental Management Systems | | | | |
| **Does your organisation use Environmentally Sustainable practices and/or Design methodology?** | | | Yes  No | |
| Please briefly provide details of your firms Environmentally Sustainable practices and/or Sustainable Design methodology below (maximum 200 words): | | | | |
| Brief Description: | | | | |
|  | | | | |
| **Environmental Management Certification** | | | | |
| We have ISO 14001 certification | Date received (dd/mm/yyyy) | Inspecting Agency | | Registration Number |
|  |  | |  |
| We plan to get ISO 14001 certification within one (1) year | Date inspection is scheduled (dd/mm/yyyy) |  | |  |
|  |  | |  |

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| **Environmental Management Processes** | | |
| **Category** | **Evaluation Standard** | **Evaluation** |
| Corporate Philosophy/Policies | 1) We have a corporate philosophy regarding environmental conservation | Yes  No |
| 2) We have established an environmental policy, and pledge both to continually strive for improvement and to prevent pollution | Yes  No |
| 3) We pledge to respect all applicable laws and regulations in our environmental policy | Yes  No |
| 4) We will ensure that all our employees comply with our environment policy and will do all we can to enable third parties to establish environmental policies as well. | Yes  No |
| Planning | 5) We have established environmental conservation targets and objectives | Yes  No |
| 6) We have a plan for achieving our environmental conservation targets and objectives | Yes  No |
| Organisation | 7) We have clearly established individual and organisational roles for meeting our targets | Yes  No |
| Evaluation System | 8) We control and evaluate the following and strive for improvement, | Yes  No |
| i) Air pollution | Yes  No |
| ii) Water pollution | Yes  No |
| iii) Noise and vibrations | Yes  No |
| 9) We do not use substances whose use is forbidden by law | Yes  No |
| 10) We have reduced our use and disposal of voluntarily regulated substances | Yes  No |
| 11)We control our use and disposal of voluntarily regulated substances | Yes  No |
| 12) We dispose of waste properly | Yes  No |
| 13) We conserve energy (electricity, natural gas, fuel, etc) | Yes  No |
| 14) The relevant regulatory authorities have not issued us any warnings or subjected us to any penalties in the past three (3) years | Yes  No |
| 15) We have a product assessment system (for evaluation of our products' compatibility with the environment | Yes  No |
| Disclosure of Information | 16) We publish or provide information on our environment conservation policies | Yes  No |

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| Part 10 – Design and Construct Capability (where applicable) | |
| **Does your organisation have a Design and Construct capability?** | Yes  No |
| Please briefly provide details of your firms Design and Construct capability below (maximum 200 words): | |
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| Part 11 – Sign Off | |
| **Suppliers are required to sign and return the Registered Supplier Application. The signature must have appropriate authority within their organisation and can attest that information supplied is accurate. A digitally signed document or image of the signature will suffice.** | |
| **Signature** |  |
| **Print Name** |  |
| **Role** |  |
| **Date** |  |