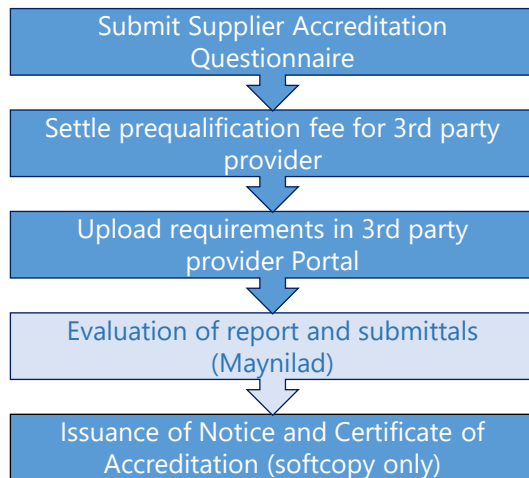


SUPPLIER ACCREDITATION QUESTIONNAIRE



ACCREDITATION PROCESS, INSTRUCTIONS AND REMINDERS



1. All suppliers must accomplish the questionnaire and submit the required documents specified below. *Failure to complete this questionnaire in full may affect the evaluation.* Incomplete submittals shall put the accreditation process on hold.
2. Legal implications shall be given to those who disclose and submit misleading, incorrect, and/or false information and documents.
3. Questions that do not apply to the supplier shall be clearly marked as “*not applicable*”. Additional explanations or justifications may be included if deemed necessary.

LIST OF REQUIREMENTS (LOCAL)

1. SEC/DTI Registration
2. BIR Registration (Form 2303)
3. Business Permit
4. Latest Audited Financial Statements
5. Scanned copy of sample Official Receipt and Sales Invoice
6. Bid Guarantee Declaration, printed on company letterhead (with template)
7. Filled-out and Notarized Certification of Employment of Former Maynilad Employees (with template)
8. Notarized External Party Anti-Fraud Declaration (with template)
9. For corporations only: Secretary’s Certificate in compliance with section 2 of Anti-fraud Declaration

If applicable:

1. ISO Certificates or equivalent
2. DOLE DO-174 Certificate
3. PCAB License
4. Notice from BIR on Large Taxpayers / Company is included in top 20,000 tax payers
5. Environmental Permits & Certificates (ex. ECC or CNC, LLDA Clearance, Discharge Permit, Hazardous Waste Generator’s ID, Permit to Operate Air Pollution Source Installation, DENR Transporter Registration Cert., & etc.)
6. Other supporting documents (in reference to Sustainability section of this questionnaire)

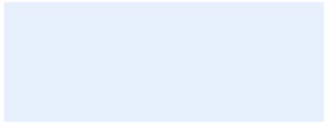
LIST OF REQUIREMENTS (FOREIGN)

1. Company Registration
2. Latest Audited Financial Statements
3. ISO Certificates or equivalent

AGREEMENT

By filling-out and submitting this form,

1. I have read, understood, and committed to support the Quality, Sustainability, and Resiliency Policy, the PO Terms and Conditions for Goods and Services, the Governance Policy, and the Vendor Code of Conduct.
2. I attest that my participation in the Maynilad Supplier Accreditation is voluntary. I shall comply with the requirements listed on page 1 of this questionnaire. I declare that I have the proper authority to disclose the relevant information contained within.
3. I agree to be endorsed to Maynilad's third-party provider for vendor prequalification. I understand that Maynilad shall not be responsible for costs and expenses incurred during accreditation.
4. I understand that completing the accreditation process does not guarantee invitations to biddings or awarding of purchase orders.
5. I hereby declare that the information supplied in this application, including all the attachments, are true and correct, and the testimonials, certificates, letters of authorization, and documents as given by the persons whose names appear on them and submitted with this application are true and genuine. I hereby allow Maynilad to contact all references provided to verify authenticity of submittals and claims, visit any supplier's office, warehouses and manufacturing locations, and interview any personnel during the entirety of the accreditation period.
6. I shall comply with Republic Act No. 10173, otherwise known as the "Data Privacy Act of 2012," its Implementing Rules and Regulations, and other applicable data privacy and protection laws, rules and regulations.
7. I understand how the personal information content in this application will be used and I consent to the use, transfer, and disclosure of the information for legitimate business purposes of Maynilad and in connection with a potential business relationship with my company.
8. I understand that if necessary, Maynilad may require supplementary documents for verification of the data I have provided in this questionnaire, and may conduct a cursory search or Municipal/Regional Trial Court verification of the company, its shareholders, directors and officers, and shall investigate on any involvement, direct or indirect, past and present, in any fraudulent acts and/or acts involving moral turpitude.

Date signed:		E-Signature:	
Name:			
Designation:			

CORPORATE INFORMATION

Provide the following information about your Company.

Your answers will be basis for the evaluation of your application for accreditation.

Established as:	Choose an item.
Supplier Type (tick all applicable):	<input type="checkbox"/> Trader / Importer <input type="checkbox"/> Manufacturer <input type="checkbox"/> Service Provider
Short description of the company and products and/or services offered:	
Name of Company:	
Address of Company:	
Telephone Number:	
Corporate Email Address:	
Website:	
Name of President /General Manager:	
Contact details of Sales Representative/s:	Name:
	Email Address:
	Mobile Number:
	Name:
	Email Address:
	Mobile Number:
Contact details of Finance Representative/s:	Name:
	Email Address:
	Mobile Number:
Number of employees in total:	
If the company is part of a larger group, give the name and address of head office:	
Founding year:	
Subsidiaries (if any):	
Area of Office (in sq. meter):	
Location of warehouse /production sites:	
Area of warehouse/production site (in sq. meter):	
Do your products include warranty and after-sales services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
ISO Certifications or equivalent (check all applicable): <i>Provide copy of the certificates</i>	<input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 45001 <input type="checkbox"/> N/A
Checklist of Office Equipment, Tools and Machineries	<input type="checkbox"/> Office Equipment <input type="checkbox"/> Laboratory Equipment <input type="checkbox"/> Manufacturing Machineries <input type="checkbox"/> Tools
List of Office Equipment, Tools and Machineries	

FINANCIAL, TECHNICAL, AND OPERATIONAL

Provide the following financial and technical information about your Company.
Your answers will be basis for the evaluation of your application for accreditation.

List of Bank References and Existing Credit Line/s

Name of Bank/Institution	Branch	Contact Person	Contact Number

List of Products and Services Offered

If necessary, you may attach an excel file following the same format below.

#	Product	Brand	Principal/Manufacturer	Country of Origin	Indicate if Exclusive, Authorized, N/A
1					Choose an item.
2					Choose an item.
3					Choose an item.
4					Choose an item.
5					Choose an item.
Services					
1					
2					
3					
4					
5					

List of Customers/Clients for the past five (5) years

If necessary, you may attach an excel file following the same format below.

#	Client Name	Contact Person	Contact Number	Email Address	Product/ Contract Description
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

SUSTAINABILITY

Maynilad is committed to engage value chain partners that align with the company's sustainability goals, principles, and standards. Vendors applying for accreditation shall be screened based on Environmental Management, Social, Governance, and Business Continuity strategies.

(Please provide evidence for each answer)			YES	NO	
Environmental	Environmental Management	1	We have an environmental management system consistent with an internationally accepted standard, e.g. ISO 14001.	<input type="checkbox"/>	<input type="checkbox"/>
		2	We have systems in place for identification, classification, management, and minimization of waste, and other green initiatives/programs.	<input type="checkbox"/>	<input type="checkbox"/>
		3	We have products/processes/services/facilities that require compliance to environmental regulations. If yes, please specify below.	<input type="checkbox"/>	<input type="checkbox"/>
	4	We have dismissed and/or pending cases with Environmental Regulators in the past (5) years. If yes, provide details and current status below.	<input type="checkbox"/>	<input type="checkbox"/>	
Energy Management System	5	We have an energy management system consistent with an internationally accepted standard. If yes, tick all applicable below. <input type="checkbox"/> Company policy/Procedure/Plan/Initiatives <input type="checkbox"/> ISO 50001 <input type="checkbox"/> Others	<input type="checkbox"/>	<input type="checkbox"/>	

(Please provide evidence for each answer)			YES	NO	
Social	Health & Safety	1	We have an occupational health & safety policy/ procedure/programs in place such as PWD-friendly facilities, non-discriminatory practices and policies, pre-employment random drug testing, annual physical examination, and the like.	<input type="checkbox"/>	<input type="checkbox"/>
	Ethical & Legal Standards	2	We have a DOLE DO 174 Certification. If yes, please submit a copy.	<input type="checkbox"/>	<input type="checkbox"/>
		3	We do not engage in Child Labor/Forced Labor.	<input type="checkbox"/> (without Child Labor)	<input type="checkbox"/> (with Child Labor)
		4	We allow Labor Union Groups. If yes, do you have an existing Labor Union Group?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Governance		YES	NO
1	We have former Maynilad Employees currently working in your company.	<input type="checkbox"/>	<input type="checkbox"/>
2	We have Key Officers with relatives and/or close friends working with Maynilad.	<input type="checkbox"/>	<input type="checkbox"/>
3	We have an on-going or finished litigation case. If yes, please provide details below.	<input type="checkbox"/>	<input type="checkbox"/>

Business Continuity Strategy		YES	NO
1	We have a back-up supplier of products, raw materials, or service providers.	<input type="checkbox"/>	<input type="checkbox"/>
2	In the event of a disaster or significant disruption, we have business continuity programs or risk management plan to restore and recover processes, and continue operations.	<input type="checkbox"/>	<input type="checkbox"/>
3	We have an alternate site location for work area recovery purposes.	<input type="checkbox"/>	<input type="checkbox"/>