



## VENDOR REGISTRATION FORM

### A. COMPANY INFORMATION

Name of Company:	Tel No.:	
Business Address:	Fax No.:	
	Email Address:	
Registered Address:	Website:	
	Contact Person :	
Business / Activity:	Date of Incorporation:	
	Date of Commencement:	
Registration/Company No:	Paid Up Capital:	
SST No:	Authorized Capital:	
Premise: Own/ Rent/ Others: Please State:.....		
Type of Company – Sole-Proprietor / Partnership / Enterprise / Private Limited Co. / Foreign Company: Please State:.....		

### B. SHAREHOLDER % THEIR HOLDINGS (%)

Name	No. of Shares	%	Name	No. of Shares	%

### C. PROPRIETOR / PARTNERS / DIRECTOR & MANAGEMENT

Name	Age	Position	Description	Residential Address

### D. LICENSE

No	Description	License No/ Gred	Remarks
1	CIDB		
2	PETRONAS		
3	OTHERS (PLEASE SPECIFY)		
4			

### E. PRODUCT/SERVICES OF SUPPLY

No	Description	Brand	Remarks
1			
2			
3			
4			

### F1. BANKING & FINANCIAL INFORMATION

Name	Description	A/C No.	Type	Amount of Credit Facilities



**F2. FINANCIAL INFORMATION**

Paid Up Capital:	Working Capital:
Annual Turnover (RM):	Total Banking Facility:

**G. PRINCIPAL / MOTHER COMPANY**

Name	Address & Telephone	Products	Nature of Business / Work Category	No. of Years	Remarks

**H. COMPANY EXPERIENCE**

**1. DETAILS OF COMPLETED PROJECTS FOR THE PAST 5 YEARS**

Name of Client / Project	Description of Scope	Contract / PO Sum	Start Date	Completion Date	Remarks

**2. DETAILS OF PROJECTS IN HAND**

Name of Client / Project	Description of Scope	Duration	Start Date	Completion Date	Remarks

**3. JOB EXPERIENCE WITH CARIMIN GROUP OF COMPANIES**

Project Name	Description of Scope	Duration	Start Date	Completion Date	Value (RM'000)



## VENDOR REGISTRATION FORM (CONT'D)

### I. MANAGEMENT SYSTEM POLICY, CERTIFICATION AND AWARDS

1. Management System (e.g. QMS, IMS, ISO, OHSAS, ENVIRONMENT etc.)	Certification Body (National/ International)	Certification Expiry Date %

2. B. Award	Certification Body (National/ International)	Year

### J. DECLARATION OF INTEREST

Section J: Declaration of Interest (If 'Yes', please complete the details)	
i.	<p>Does any of your employee, officers or directors/ senior management have any relationship (family, friend, or other) with persons in the service of CARIMIN Group of Companies?</p> <p style="text-align: right;"> <input type="checkbox"/> No    <input type="checkbox"/> Yes  <i>Name:</i> _____  <i>Relationship:</i> _____         </p>
ii.	<p>Does any of your company's directors, senior management, principal shareholders, or stakeholders in service of CARIMIN Group of Companies?</p> <p style="text-align: right;"> <input type="checkbox"/> No    <input type="checkbox"/> Yes  <i>Name:</i> _____  <i>Designation:</i> _____         </p>
iii.	<p>Within the last three (3) years, did any of the company's directors, senior management, principal shareholders, ever been found involved into any criminal, bribery, or corruption case?</p> <p style="text-align: right;"> <input type="checkbox"/> No    <input type="checkbox"/> Yes  <i>Name:</i> _____  <i>Designation:</i> _____         </p>
iv.	<p>Does the Company allow facilitation payment practice in its business dealings?</p> <p style="text-align: right;"> <input type="checkbox"/> No    <input type="checkbox"/> Yes  <i>Name:</i> _____  <i>Designation:</i> _____         </p>
v.	<p>Does the Company have any channels in place to allow reporting of any misconduct?</p> <p style="text-align: right;"> <input type="checkbox"/> No    <input type="checkbox"/> Yes  <i>Name:</i> _____  <i>Designation:</i> _____         </p>
vi.	<p>Does the Company rely on agents or intermediaries for its business operations?</p> <p style="text-align: right;"> <input type="checkbox"/> No    <input type="checkbox"/> Yes  <i>Name:</i> _____  <i>Designation:</i> _____         </p>

## VENDOR REGISTRATION FORM (CONT'D)

### J. DECLARATION OF INTEREST (CONT'D)

<b>Section J: Declaration of Interest (Cont'd)</b> <i>(If 'Yes', please complete the details)</i>		
vii.	Does the Company have a code of conduct or any form of formalized ABAC policy and guidelines?	<input type="checkbox"/> No <input type="checkbox"/> Yes Name: _____ Designation: _____
viii.	Does the Company conduct due diligence on third parties with which it does business?	<input type="checkbox"/> No <input type="checkbox"/> Yes Name: _____ Designation: _____
ix.	Does the Company have any policy to govern gift, corporate hospitality and entertainment giving and acceptance?	<input type="checkbox"/> No <input type="checkbox"/> Yes Name: _____ Designation: _____
x.	Do any company's directors, senior management, principal shareholders, have connections with government official / politician (including immediate family member)?	<input type="checkbox"/> No <input type="checkbox"/> Yes Name: _____ Designation: _____
xi.	You are aware that Carimin committed to comply with our Corporate Governance amongst others Code of Conduct and Business Ethics ("CoBE"), Anti Bribery & Corruption Policy (ABAC), Whistle Blowing, Human Rights & Labour Policy.  <a href="https://carimin.com/corporate-governance/">https://carimin.com/corporate-governance/</a>	<input type="checkbox"/> No <input type="checkbox"/> Yes Name: _____ Designation: _____
xii.	Does your company currently collect, calculate, and monitor its GHG emissions? (Please specify whether you have data for Scope 1, 2, and 3 emissions.)  <i>If yes, could you provide details on your organization's GHG emission data and any reduction targets or initiatives you have in place?</i>  <i>If no, are there plans to implement GHG data collection and monitoring in the near future? (Please provide a timeline or strategy if applicable.)</i>	<input type="checkbox"/> No <input type="checkbox"/> Yes Name: _____ Designation: _____



## VENDOR REGISTRATION FORM (CONT'D)

### K. DECLARATION BY VENDOR

Section K: Declaration	
<p>By signing this document, the undersigned, being duly authorized to complete this questionnaire, hereby certify the following:</p> <ol style="list-style-type: none"> <li>i. Declares that he/she has, or has obtained from the relevant authority, the proper mandate and authority to disclose such information;</li> <li>ii. Consents to the processing of such information for the purpose described in the <i>Third (3<sup>rd</sup>) Party Integrity Declaration – Annex A of ABAC Policy</i>;</li> <li>iii. Represents that the information provided in this document is, to the best of his/her knowledge is accurate, current, and complete as of the date of disclosure;</li> <li>iv. The Vendor and its directors, officers and employees are complying to all applicable laws, statutes, regulations, and codes relating to anti-bribery and corruption matters;</li> <li>v. The Vendor will not, either directly or indirectly, promise, offer or give any bribe or an improper advantage (in any kind of form whether financial or otherwise) to any individual in CARIMIN or any other individual representing CARIMIN, as an inducement, incentive, reward, gift, or bonus to be selected and/or for any other purpose connected to the Business Transaction.</li> </ol> <p>Signed by the authorized representative of the company:</p>	
Signature:	
For and on behalf of (Your Company Name):	
Name:	
Designation:	
Date:	
Company Stamp:	

## VENDOR REGISTRATION FORM (CONT'D)

**L. OFFICE USE**

Section L: For office use Only - Approval <i>(To be completed by Officer)</i>		
i.	Type of Application	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Update / Change of Business Information
ii.	Total Score:	
	Point	
	%	
	Result	
iii.	Received Date	
iv.	Processed By:	I have reviewed the submission and recommend for AVL. <input type="checkbox"/> Yes    or <input type="checkbox"/> No
	Name	{PA Name}
	Designation	
	Date	
v.	Reviewed By:	I have reviewed the submission and recommend for AVL. <input type="checkbox"/> Yes    or <input type="checkbox"/> No
	Name	
	Designation	{Procurement Manager}
	Date	
vi.	Approved By:	
	Name	
	Designation	{HOD, Procurement}
	Date	

 Remarks (If Any):
   
  
 .....

<i>Documents to be submitted together with this application</i>	
Form 9	<input type="checkbox"/>
Form 24	<input type="checkbox"/>
Form 49	<input type="checkbox"/>
Company	<input type="checkbox"/>
Profile Brochure/Catalogue	<input type="checkbox"/>