



QUESTIONNAIRE FOR CONTRACTOR APPROVAL

To be completed and returned to

Contracts Department
German Creek Mine via Middlemount
Middlemount Queensland 4746 Australia
Phone: +61 (0) 7 4985 0388
Fax: +61 (0) 7 4985 2006

INSTRUCTIONS FOR COMPLETION:

- a) Organisations with an annual turnover in excess of \$500,000 must answer all questions. Organisations with an annual turnover less than \$500,000 need only answer questions denoted by "*". **If the question relates to your organisation, you should answer it regardless of your organisation's annual turnover.**
- b) Answers submitted must apply specifically to the company named in Question 1.1 and must be exclusive of the activities of parent, associate or subsidiary companies, except where specified.

Person whom requested completion of this form: _____

1. CORPORATE AND FINANCIAL DETAILS

1.1* Name and Address of Company

ABN Number: _____

Names and Position of Key Personnel:

1.2* Telephone Number: _____

1.3* Facsimile Number: _____

1.4* E-mail address: _____

1.5* Country of Registration: _____

1.6* Date Established: _____



1.7* Names of Parent, Associated and Subsidiary Companies:

1.8* Please indicate annual turnover for the last three financial years supported by a copy of your most recent audited financial accounts (balance sheet and profit/loss)

Annual Turnover	20....	20....	20....
Domestic	_____	_____	_____
Export	_____	_____	_____

1.9* Which bankers do you use?

1.10 Which auditors do you use?

1.11* Insurers (PLEASE ATTACH COPIES OF CURRENT CERTIFICATES)

Workers Compensation	_____
Policy Number/Expiry Date	_____
Public Risk	_____
Policy Number/Expiry Date	_____
Other (please specify)	_____
Policy Number/Expiry Date	_____



2. ORGANISATION, PERSONNEL AND INDUSTRIAL RELATIONS

2.1* Please attach a copy of your organisation chart (showing relation to corporate structure/associated and/or subsidiary companies if applicable.)

2.2* Please indicate below numbers of employees and contract staff (No one should appear under more than one heading).

<i>Category</i>	<i>Own Employees</i>	<i>Contract Staff</i>
Management	_____	_____
Design/Engineering staff	_____	_____
Quality Assurance	_____	_____
Quality Control/Inspection	_____	_____
Purchasing/Administration/etc	_____	_____
Trades persons	_____	_____
Others	_____	_____
Total	_____	_____

2.3* To which Unions do your employees belong?

2.4 Which award or agreement applies to your employees?

2.5 Date Working Agreement Expires: _____
and/or
Wage Award Review Date: _____

2.6 Average number of person-days lost per year over the past five years due to Industrial disputes:

2.7* Please provide a brief outline of the Company's I.R. policy and the industry groups of which your Company is a member.



3. SAFETY

3.1* Does your company have a signed Safety Policy? (please attach a copy)

3.2* Please provide details of your current safety plan or programme

3.3* What instructions would normally be given to your employees regarding behaviour on client's sites?

3.4* Please advise details of your safety performance over the last 3 years (number of Lost Time Injuries, Medical Treatment Cases etc)

4. QUALITY

4.1* Does your company have a signed Quality Policy? (please attach a copy)

4.2* Does your company have a Quality Policy Manual? (are you able to provide a copy?)

4.3* Is your company (or product or services) registered to any quality standard or with and quality organisation? (eg. AS3901/3902, Standards, NATA etc)



4.4 If you are not quality registered, do you intend to pursue registration to any standard or organisation? (include target dates)

4.5 Has a QA Manager been appointed in your organisation? To whom does he/she report?

4.6* How does your company deal with customer complaints?

4.7 Do you perform your own internal Quality Appraisal Audits? How often?

4.8 When was the most recent internal quality audit carried out? (please attach a copy of the report)



5. INDUSTRIAL EXPERIENCE

5.1* Provide brief details of any past contracting experience for mining industries.

5.2* Provide details of other industrial experience

5.3* Please provide a list of reference companies (including contact names, telephone numbers and positions) that we may wish to contact with respect to your industrial experience.

5.4 Please provide information of work currently in hand including type of work, size, value, numbers of trades engaged etc.



6. PLANNING AND SCHEDULING

6.1 What work planning methods are used by your company?

- (i) bar charts
- (ii) network scheduling
- (iii) precedence networks

6.2* How is work priority determined?

6.3* How do you control the timing and costs of work?

6.4 What corrective measures do you take to maintain work schedules?



7. FACILITIES AND CAPACITIES

7.1* If applicable, please provide brief details of workshop or other facilities maintained by your company including details of capacities, equipment inventory, location and any limiting features that apply (eg. Max lifting capacity, etc.). Please use separate sheet if necessary.

7.2* If applicable, do you have facilities for final hydrostatic testing of piping and vessels and/or for destructive and non destructive testing?

7.3* If applicable please describe your design facilities.

7.4* Does your company have design expertise? In what fields?

7.5* Do you hold any licenses for procedures, systems or products? Please provide details.



7.6* Sub Contracting
Please list below activities and types of work subcontracted, indicating:
Names of your major sub-contractors
Services they provide
Codes applied
QA Appraisal information you have on your sub-contractors
Your recent (past 24 months) experience with them
(Please continue on separate sheet if necessary)

8. CONTRACTUAL

8.1 Do you have any preferences for or are there any limitations on commercial conditions with respect to turnkey/lump sum, hourly rates/reimbursable, cost plus, ceiling price, penalty/bonus clauses etc?

8.2* Are you willing to perform work under a client's contractual conditions? (eg. Anglo Coal General Conditions of Contract or Standard Agreements)

9. ENGINEERING STANDARDS AND PRACTICES

9.1* Do you have your own standards and practices? Please provide examples of standard forms etc.



9.2 Please advise if you have any knowledge of:

Australian Standards and Regulations?

Mining Acts?

10. AFTER HOURS AVAILABILITY

10.1 Please provide names and positions of key personnel who would be available after normal working hours



11. DOCUMENTS SUPPORTING THE INFORMATION IN THIS QUESTIONNAIRE

The following information is to be provided to support your responses to this Contractor Information Questionnaire.

Annual Report (refer question 1.7).

Organisation chart (refer question 2.1).

Copy of your Safety Policy (refer question 3.1).

Copy of your Quality Assurance Policy, and manual if available (refer questions 4.1 and 4.2).

Copy of your latest Quality Appraisal Audit Report, if available (Question 4.8).

List of main equipment (refer question 7.1).

List of sub-contractors (if not completed under question 7.6).

NAME OF PERSON COMPLETING THE QUESTIONNAIRE:

POSITION IN THE COMPANY:

SIGNATURE:

DATE:
