

1. Supplier Information

To our valued Supplier:

Kindly return this Supplier Information to the SBS Philippines Corporation contact listed below:

SBS Philippines Corporation Contact:

Position:

Contact Number:

Email Address:

New Supplier is requested to submit the Supplier information form, supporting documents and permits in soft copy.

Existing Suppliers are requested to submit updated Supplier information form, supporting documents and permits within the first quarter of the current year.

Thank you in advance for your interest and participation.

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2. Introduction

Purpose of Supplier Information Form

SBS PHILIPPINES CORPORATION is one of the country's leading importer and distributor of industrial and fine chemicals. These chemicals are stored in warehouses located at various parts of Metro Manila. Our customer base consist of companies in practically all industries (pharmaceuticals, plastic, rubber, food, paints, feeds, agricultural, etc.) Therefore, SBS Philippines Corporation has the obligation to ensure that all food products we supply meets the industry and product related regulatory requirements, are safe and fit for purpose.

This Supplier information form allows the Supplier to review and update their information to ensure that the defined standard procedures, measures and protocols are in place for the products and services that you supply to SBS Philippines Corporation.

It is a tool for an accurate, meaningful and timely analysis to understand the capability, quality management system, core business and strategic outlook of the Supplier. This will also help us in systematically identifying similarities and differences between suppliers in the market.

This questionnaire is designed to evaluate your reliability as a supplier to partner with us in providing quality products and services for maintaining a successful operation in a more convenient way.

By answering all sections in this form, the person completing it is confirming that the data entered is correct, to the best of their knowledge and that they are authorised to complete this document on behalf of their company.

Please return to SBS Philippines Corporation contact listed on the cover page within 15 days from the date emailed. You have our assurance that all of the information disclosed shall be guarded in the strictest of confidence. If you have any questions, please contact us.

Thank you.



3. Company Information

Indicate "not applicable" for items that are not applicable to your company.

1. Supplier Category

Mark the type of materials and/or service that you intend to provide.

<input type="radio"/> Raw Material Suppliers	<input type="radio"/> Finished Goods	<input type="radio"/>
<input type="radio"/> Packaging Material Supplier	<input type="radio"/> Services	

2. Company Information

Company Name

Company Address

City State/Province Country Zip Code

Phone Fax Website

Subsidiary or Affiliated Companies

Type of Ownership (Public/Private)

Years in Operation Years

Years supplying Goods and Services related to intended products/ services to be supplied to SBS Philippines Corporation Years

Type of Business

Description

<input type="radio"/> Manufacturer	<input type="radio"/> Contractor
<input type="radio"/> Exporter	<input type="radio"/> Service Provider
<input type="radio"/> Distributor	<input type="radio"/>

Primary Distribution Locations for Products related to intended products to be supplied to SBS Philippines Corporation



3. Please provide Information for the Contact Person for SBS Philippines Corporation

	Primary Contact Person	Alternate Contact Person
Name	<input type="text"/>	<input type="text"/>
Title/Position	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
Mobilie No.	<input type="text"/>	<input type="text"/>
Fax No.	<input type="text"/>	<input type="text"/>
E-mail Address	<input type="text"/>	<input type="text"/>

4. Please provide the contact information of your company officer who are authorized to sign memorandum of agreement/contract and other legal documents on company's behalf

	Primary Contact Person	Alternate Contact Person
Name	<input type="text"/>	<input type="text"/>
Title/Position	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
Mobilie No.	<input type="text"/>	<input type="text"/>
Fax No.	<input type="text"/>	<input type="text"/>
E-mail Address	<input type="text"/>	<input type="text"/>

5. Please provide additional names and contact information for your company

Chief Executive Officer (CEO)	<input type="text"/>	Contact Information	<input type="text"/>
Chief Finance Officer (CFO)	<input type="text"/>	Contact Information	<input type="text"/>
Manufacturing Head	<input type="text"/>	Contact Information	<input type="text"/>
Marketing Head	<input type="text"/>	Contact Information	<input type="text"/>
Sales Head	<input type="text"/>	Contact Information	<input type="text"/>
Customer Service Head	<input type="text"/>	Contact Information	<input type="text"/>
Supply Chain Head	<input type="text"/>	Contact Information	<input type="text"/>
Quality Systems Head	<input type="text"/>	Contact Information	<input type="text"/>

4. Manufacturing Capabilities

Product/s	Manufacturing Site	Have you experienced any issues with raw material availability and pricing?	Quality Management System	How long do you keep the retained sample of product batches?
		<input type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Good Manufacturing Practice Certificate <input type="checkbox"/> Phytosanitary/Health Certificate <input type="checkbox"/> ISO Certification <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> HACCP Certificate <input type="checkbox"/> Others: _____	
		<input type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Good Manufacturing Practice Certificate <input type="checkbox"/> Phytosanitary/Health Certificate <input type="checkbox"/> ISO Certification <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> HACCP Certificate <input type="checkbox"/> Others: _____	
		<input type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Good Manufacturing Practice Certificate <input type="checkbox"/> Phytosanitary/Health Certificate <input type="checkbox"/> ISO Certification <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> HACCP Certificate <input type="checkbox"/> Others: _____	
		<input type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Good Manufacturing Practice Certificate <input type="checkbox"/> Phytosanitary/Health Certificate <input type="checkbox"/> ISO Certification <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> HACCP Certificate <input type="checkbox"/> Others: _____	
		<input type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Good Manufacturing Practice Certificate <input type="checkbox"/> Phytosanitary/Health Certificate <input type="checkbox"/> ISO Certification <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> HACCP Certificate <input type="checkbox"/> Others: _____	
		<input type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Good Manufacturing Practice Certificate <input type="checkbox"/> Phytosanitary/Health Certificate <input type="checkbox"/> ISO Certification <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> HACCP Certificate <input type="checkbox"/> Others: _____	

5. Customer Service, People Management and Sustainability

Customer Service

1. Customer Complaint Personnel

There is a dedicated personnel assigned to address customer complaints.

Yes No NA

2. Customer Complaint Procedure

There is a documented procedure in addressing customer complaints.
(Procedure is available to customer upon request)

Yes No NA

3. Customer Complaint Review

Management has reviewed prevalent customer complaints and addressed the problems.

Yes No NA

4. Review of Operational Downtimes

Management has reviewed root cause of operational downtimes and addressed the problems.

Yes No NA

People Management

5. Health Certificates

Personnel have health certificates.

Yes No NA

6. Hygiene

There is a provision for proper uniform and appropriate personal protective equipment for personnel.

Yes No NA

7. Training

Personnel have undergone food safety trainings and mandatory regulatory trainings.

Yes No NA

Sustainability

1. Environmental Considerations

Have you set up any policies/goals/activities in order to manage environmental impact?
If yes, please provide the policy, or details of goals and activities.

Yes No NA

2. Social Conditions

Do you comply with labor laws and standards that promote respect for human rights, and disallows child labor and forced labor?

Yes No NA

3. Bribery and Corruption

Do you agree to maintain the highest degree of business ethics, and comply with all rules and regulations on bribery and corruption?

Yes No NA

6. Permits and Other Documents

For Raw Material, Packaging Material Suppliers, Toll Manufacturer, Traded Item Suppliers, Contractors and Service Companies

Permits listed per supplier category are mandatory unless specified Optional.

Kindly submit scanned copy of the permits together with this Supplier information form.

Once qualified, suppliers are required to submit the permits within the first quarter of every year or as necessary.

Mark boxes to indicate the permits attached in this form.

Operational Permits

- Business Permit
- Department of Trade and Industry (DTI) Permit
- Certificate of Registration (BIR Form 2303)
- Securities and Exchange Commission (SEC) Registration
- License To Operate
- Required except for packaging material suppliers*
- Permit To Operate Plant Machinery / Vessels from Department of Labor and Employment (DOLE)
- Mayor's Permit
- Vicinity Map of the Office
- Proof of Ownership/Lawful Occupancy of Principal

Environmental Permits

- Building Permit
- Sanitary Permit
- Fire Inspection certificate

Organizational Documents

- Company Profile
- Organizational Structure

Training Documents (for Contractors and Service Companies)

- List of Trainings and Sample Training Certificates of Workers Assigned to SBS Philippines Corporation

Quality Management System

- Systems Certification (FSSC, ISO, HACCP, GMP, etc.)

Specify versions:

Consent to Data Collection

I/we grant my/our free, voluntary and unconditional consent to the collection and processing of all personal data, and account or transaction information or records relating to me/us disclosed/transmitted by me/us in person or by my/our authorized agent/representative/s to the information database system of SBS Philippines Corporation and/or any of its authorized agent/s or representative/s as information controller, by whatever means in accordance with Republic Act No. 10173, otherwise known as the "Data Privacy Act of 2012" of the Republic of the Philippines, including its Implementing Rules and Regulations as well as all other guidelines and issuances by the National Privacy Commission.



Authorized Signatory