



Supplier Approval

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All sections of this form must be completed **in full** to enable an account to be set up. Failure to do so will delay your application and may result in it being returned. For assistance completing this application or to return the completed pack please contact the team via purchasing@seabenergy.com.

Data protection: SEAB Energy Limited will use this information according to our approval procedure and it may be displayed on our secure company intranet. You have the right to ask for a copy of the information we hold about you and to correct any inaccuracies.

Section 1: Company details

Company name			
Nature of core business			
Product Category			
Details of Machinery (Manufacturer Only)			
Trading address			
Postcode			
Contact for this form		Telephone	
E-mail address		Fax	
Company reg. no		DUNS no	
Is your company part of a group of companies? (please give details)			
Business with SEaB Energy in last 5 years			
Bank account name			
Account number		Sort code	

Please complete fields below with contact details for receipt of Purchase Orders (**please note the email must be a generic address**).

Email		Fax	
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Section 2 : References

Please state the Company names, site addresses, telephone numbers and contact names of referees from whom references may be sought, and indicate if you require the initial contact to be made by your company.

1.	Company name: Contact name: Telephone number: e-mail: Full postal address:	Initial contact by yourselves? (yes/no)
2.	Company name: Contact name: Telephone number: e-mail: Full postal address:	Initial contact by yourselves? (yes/no)

Section 3: Health and safety and documentary evidence

Have you had any HSE reportable accidents or dangerous occurrences in the last 5 years? If yes, please attach details of all incidents.	Yes		No	
Have you been prosecuted or given warning notices over the last 5 years by ANY enforcing authority: If yes, please attach details of all incidents.	Yes		No	
Are you ISO certified?	Yes		No	
Type of Certificate:				
Validity of Certificate:				
Issuing authority:				
Year of Certification:				



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Provide details and copies of certificates listed below:

Certification:	Business area:	Expiry date:	Attached
Liability Insurance			
Certificates that are mandatory for your business:	Business area:	Expiry date:	Attached

Section 4: Corporate social responsibility

SEAB Energy takes Sustainability extremely seriously and as such is an integral part of our business and supply chain. There are five key pillars which our CR initiatives are based on; Health & Safety, Workplace, Marketplace, Environmental and Community.

Can your organisation subscribe to the Global Compact Principles / International Labour Organisation (ILO) Charter, Ethical Trading Initiative Base Code (adopted by SEAB Energy)?

Employment is freely chosen	
Freedom of association is respected	
Working conditions are safe and hygienic	
Child labour shall not be used	
Wages are not lower than 'minimum wage'	
Working hours are not excessive	
No discrimination is practiced	
Regular employment is provided	
No harsh or inhumane treatment is allowed	

Supporting Comments:



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Section 5: Construction industry scheme (CIS) tax deduction (subcontractors only)

As an employer of sub-contractors SEAB Energy has an obligation to ensure that CIS tax deductions are made where appropriate. You must complete all boxes for your company type. If your details cannot be verified on the information submitted, you will automatically incur the "top tax" rate of 30%.

Are you registered under CIS?	Yes		No	
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Complete the section below that relates to your company type:

Limited / PLC company	Full name of company			
	UTR Number (first 10 digits)		Co reg no.	
Sole Trader	Full name of company			
	UTR number (first 10 digits)			
	National insurance number			
	Full name on NI card			
Partnership	Full name of partnership			
	Partnership UTR number (first 10 digits)			
Partner full name		Personal UTR number	National insurance number	

Section 6: Declaration Tick boxes to confirm.

We confirm we accept SEAB Energy's standard Terms & Conditions.

We certify that the information supplied herein is accurate to the best of our knowledge and that this Company will only undertake work that it is competent to do. We will ensure that our workforce is adequately trained to carry out their work safely and efficiently.

Signed:	Name:
	Position:
Date:	Please tick the box below to indicate that you have authorisation on behalf of the company to be signing this declaration. <input type="checkbox"/>
Telephone:	

FOR OFFICE USE ONLY

Name of Approver	
Approval Status:	
Signature:	

