

POTENTIAL CONTRACTOR ASSESSMENT FORM

(Appendix 1)

This part to be completed by contractor

For official verification

(✓= True, X=Not True, O=Unable to confirm)

Company Name (Year in Business) : _____ () []
 Registered Address of the Company : _____ []
 _____ []
 Company Tel. No. : _____ Fax: _____ E-mail: _____ []
 * Business Registration Certification No. : _____ Date: _____ []
 Business Nature : _____ []

1.0 Details of the Company in-charge and Partners

Position	Name	HKID Card No.	Contact Tel. No.	Correspondence Address
Holder				
Partners				
Authorized Representative				

2.0 * Insurance Policy held by the Company

Policy	Insurance Company	Policy No.	Valid Period
Workman's Compensation			
Third Party Liabilities			

3.0 Job Reference (* Representative jobs completed in recent years with evidence e.g. job orders)

Item	Project Work Description	Client	Contact Tel. No.	Contract Sum (HK\$)	Period (mm/yy to mm/yy)

4.0 Key Personnel of the Company

Position	No. of Employees of Each Rank	Name	* Post-secondary Academic Awards & Professional / Trade Qualifications	Relevant Working Experience (No. of year)	Date of Joining the Company
Contract Manager					
Engineer / Site Agent					
Supervisor / Foreman					
Qualified Workers					

5.0 * Quality Management System

Please give details of ISO Certificate for the company (if already obtained); OR indicate any plan to implement ISO Quality Management System in the company.

ISO Certification Obtained (ISO9001, ISO1400, ISO45001, OHSAS 18001)			
Yes		No	
Scope of Certification	Certificate No. and Date	Details of Plan to Implement QMS (Please submit evidence, e.g. date of certification audit programme with a certifying body)	Target Date of Certification (if any)

6.0 * Safety Management System

Please give details of Safety Management System (if already in existence); OR indicate any equivalent actions on safety management

Safety Management System Already Implemented		
Evaluation Criteria	Yes. Please give information below	Though not yet, equivalent actions being undertaken with evidence
Safety Policy Statement/ Safety Plan/Safety Manual		[]
Risk Assessment/Method Statement (Safety)		[]
Safety Officer/Safety Supervisor/Competent Person		[]
Safety Provisions & Training (% of Project Cost)		[]

7.0* Environmental Management System (EMS)

Please give details of policy/ license/registration of the company and other EMS measures in the company

Formal Environmental Management System Already Implemented		
Evaluation Criteria	Yes. Please give information below	Though not yet, equivalent actions being undertaken with evidence
EMS policy statement / Plan /Manual		
EPD registered chemical waste producer / Construction waste billing account		
Environmental awareness practice (available MSDS, environmental procedure, risk assessment)		[]

8.0 * Inclusion in the HKSAR Government's Relevant Approved Supplier / Contractor Lists

_____ []

9.0 * Past Performance with CK Asset & Hutchison Property Management Company Limited (HPML)

_____ []

Remarks: Please submit the necessary supporting documents and the Checklist (Appendix 1) attached to this form.

* Copies of documents should be enclosed for assessment purpose.

I/We declare that all above information completed by me/us is true, and I/We attach copies of the relevant document.

I/We declare that our directors, shareholders, employees, agents and sub-contractors, who will involve the contracts or any business in related to HPML and his subsidiary, have no any conflict or potential conflict of interest with the employees of HPML and his subsidiary.

Authorized Signature : _____ Company's Chop : _____

Name in Block Letter : + Mr/Ms/Miss _____ Date : _____

(For Office Use)

I/We hereby declare that I/we +have/have not any beneficial relationship with the referred Contractor/ Supplier.

Remarks: _____

Referred by : _____ Position: _____ Date: _____

Results of assessment:

- Accepted to be an approved contractor at the confirmed classification/ trade of _____ and the contractor is
 - a. Very good to maintain safety provision at high level
 - b. Acceptable to carry out basic safety requirements but to be monitored closely
 - c. Not suitable for undertaking hazardous works, major works at an estimate cost above HK\$150,000 or maintenance term contracts with 1-year or more contract period unless effective improvement has been made.
- Rejected

Date of Assessment Meeting: _____ Chaired by: _____

+ delete where inappropriate