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Guidelines for Indirect Supplier - SAP Ariba Qualification Process

Revision 1.0 – Apr 26th, 2021

This document is intended to be a supporting material for all potential Indirect suppliers who will or is currently undergoing *Vestas Supplier Qualification Process*, a mandatory step to be a Global Vestas business partner.

This material should be used for consulting of best practices and tips so all steps are correctly understood, and the qualification process can be performed in an efficient and timely manner.

The main phases are described as following:

- **Supplier Registration Process**: refers to the first step of becoming a potential Vestas supplier. It refers to an online system registration where supplier shall provide company & billing data.
- **GAN Compliance Assessment:** all suppliers undergo a third-party due diligence screening covering business ethics and sanctions. Depending on the level of risk identified, the screening may consist of an internal questionnaire to be completed by the Vestas requestor and an external questionnaire to be completed by the supplier. If the screening identifies any compliance issues, Compliance develops mitigating actions with the requestor to lower our risk exposure. However, if the supplier is from an embargoed country, they will be rejected at this stage. If the supplier is subject to targeted sanctions, Vestas Compliance group consults with Export Control & Sanctions to determine if Vestas can engage with the supplier or not.
- **Self-Assessment:** supplier self-evaluation done in on online platform as per Vestas defined questionnaire. Scope of questionnaire shall vary according to supplier segmentation and characteristics of intended business but as general guideline it is a system audit to evaluate supplier maturity on quality, EHS, compliance and sustainability areas. For scopes that does not required work on-site, this step is not applied.
- On-site Assessment: audit performed at any supplier project location by a Vestas 3rd party entity to verify QHS maturity level. This step is eligible depending on the result of the following criteria: self-assessment score, TRIR, number of fatalities and country risk (see Figure 2). For scopes that does not required work on-site, this step is not applied.



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Figure 1 – Summary of Supplier Onboarding Steps



All Indirect suppliers are qualified based on the process and criteria described below. The assessment score is combined with safety & compliance indicators which will result a final supplier score and risk segmentation, which defines supplier full approval, interim approval based on action plan or supplier rejection.



Figure 2 - Summary of Qualification Criteria's to be considered

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• TRIR – total recordable injury rate: ratio of the company the accident rate in the last year.

Calculation Formula: *Total Number of Recordable Cases x 1.000.000 hours / total hours worked by all employees during the year covered. OBS:* recordable cases shall include fatalities, LTI, RWI and MTI.

- Number of fatalities: number of fatal accidents occurred in the last 3 years for supplier company and its supply chain under active contractual relationship.
- Country Risk Level by Maplecroft[™]: fixed and annual global risk index that evaluates political, human rights and environmental risk per country, given by Vestas.

Lost Time Injuries (LTIs): A work-related injury resulting in at least one lost workday after the day of the incident.

Medical Treatment Injuries (MTIs): An injury that does not involve Lost Workdays or Restricted Workdays but requires treatment by physician.

Restricted work injuries (RWIs): A work-related injury resulting in the injured person being unable to perform one or more of the routine functions of their job or from working the full workday.

During the Supplier Qualification Process the supplier will interact with different departments within Vestas, such as Sourcing, Supplier Quality & Development (SQD), & the Master Data Team. SQD department has the responsibility to evaluate the questionnaires and approve or reject the qualification, based on the supplier maturity level verified.

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Qualification Rules & Best-Practices

Please make sure the rules and best practices are known and followed to ensure a more efficient and high-quality qualification process:

- Vestas threshold for approval is ≥ 70%. Please ensure the questionnaire is completed with adequate, comprehensive comments and evidences so the company can be evaluated correctly.
- Evidences & comments are mandatory for all question rated option 3 and above and all "yes" options. Any question that does not contain the above, will not be considered and questionnaire will be rejected, and further clarification will be requested by Vestas SQD team.
- The official Vestas language is English so all questionnaire comments, evidences and supporting documents shall be in English. Alternatively, Spanish, Portuguese, Polish, Chinese, Hindi, and Russian could also be accepted.
- Make sure the selected reply is consistent with the evidence provided, based on the company current process. Any discrepancies between attached evidences and chosen reply level the questionnaire will be rejected, and further clarification will be requested by Vestas SQD team.
- Questionnaires will be reviews by Vestas SQD Team up to 03 (three) times. On the 3rd submission the assessment will be closed as is and subjected to approval or rejection.
- The expectation and deadline for questionnaire submission is 14 (fourteen) days. Consistent lack of response or reaction from supplier will be subjected to qualification process cancellation.
- If there are any questions, please reach out to *Vestas Supplier Assessment Team* <<u>supplierassessment@vestas.com</u>> for clarification prior to the assessment submission to avoid questionnaire rejection.

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Becoming a Vestas supplier

When qualification is successfully concluded and sub-contractor is an approved Vestas supplier, only then project and service awarding shall be allocated to the supplier. In case of qualification rejection, commercial discussion shall not continue, and supplier will have the chance to re-apply after 06 months of working on the improvement and gaps found and communicated during the qualification phase.

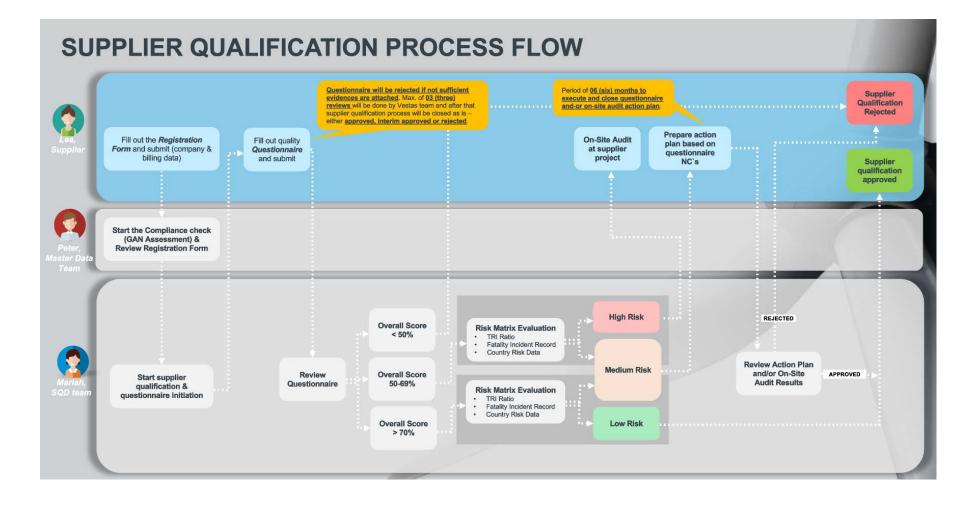
During the RFQ phase, the relevant technical documents and requirements will be shared by your Vestas Sourcing Responsible. For the Health & Safety scope, there is a master document that will guide all HSE requirements that should be considered and met by the supplier *e.g., HSE training requirements for all technicians to be able to perform any job with Vestas*.

For further information and detail, please request the document "0045-7770_V15_Global Minimum Contractor HSE Requirements" to your Sourcing Responsible. In case the scope is crane services, "0049-0574_Crane Safety Program" will be also part of RFQ package.

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Appendix A – Roles & Responsibilities Qualification Process Flow



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Appendix B – Qualification Questionnaires Guidelines

*Herewith the complete questionnaire. Its extension depends on the risk level identified for the supplier scope so please consider the questions present in your individual questionnaire only.

| 1 | HEALTH & SAFETY MANAGEMEN | NT SYSTEM | Description/Evidences | |
|-----|--|------------|--|--|
| 1.1 | How do you demonstrate commitment to the | HSE POLICY | 1. No commitment or policies in place. | You do not have/ follow any policy or procedure to ensure health and safety of your employees |
| | occupational Health & Safety system and ensure all employees are aware? Guides/Evidences: | | 2. H&S is recognized but only at the reactive mode. Limited understanding, deployment and policies covering H&S area. | Actions were taken only after the incident occurrence, no preventive measures are taken, Health & Safety measures are implemented partially |
| | ISO 45001, (OHSAS 18001) certificate, policies and procedures. | | 3. H&S is well understood and supported by all employees. H&S targets are set but considered less important for some areas. There is a strong proactive approach to incidents prevention and healthy behaviors. Evidence of active senior management involvement in E/OH&S disciplines | Policy in place, but not effectively implemented in all areas of work, Limit to specific scope of work alone H&S Policy and procedure followed can be provided as evidence |
| | | | 4. There is strong commitment to E/OH&S at all levels of the organization. Targets are broadly set and considered as important as other business-related targets. H&S considerations are part of most day-to-day processes. Evidence of H&S disciplines is consistent. | Policy in place, effectively implemented in all areas of work, Health and safety targets are set year on year and steps are taken to achieve this Policy & procedure along with Target set for present year vs Actuals can be provided as evidence |

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| | | | 5. There is uniform, strong commitment to H&S at all levels of the organization. H&S plays an important role in long-term vision definition. Concrete and aggressive targets are universally communicated and connected to compensation for key people in the organization. Evidence of H&S disciplines have supported improvement from all levels in organization. | Policy in place, Implemented in all areas of work, Long terms targets set for next five years, Targets are clearly communicated to all level of the organization and it is under supervision of key people in the organization Policy & Procedure along with HSE targets set for next 5 years and How HSE targets are Linked to KPI of key people in the organization can be provided as evidence |
|-----|--|-------------------------------|---|---|
| 1.2 | 1.2 How are Health and Safety risks managed in your company? Guides/Evidences: Risk Matrix Safety Training Plan Induction on Safety PPE Guidelines PPE adherence in shop floor Safe Job procedure/ Safety risk assessment for all Jobs Safety training plan and content | HAZARDS & RISKS MANAGEMENT | No evidence to any formalized system. Knowledge of H&S or a Safety Management System based on basic knowledge. There is no independent HSE structure in the company. | You do not identify Health & safety risk, there is no system followed No HSE Team in your organization, People and management have basic knowledge, only reactive measures taken after the incident occurrence |
| | | | 3. Risks are identified and managed by introducing mitigation actions e.g. protective equipment and necessary training. Full comply to H&S requirements presented and no hazardous behavior observed. | Safety Risks identification and Risk matrix generated with future action plan, which includes necessary trainings, But No regular Updates were performed on the risk matrix with new risk identified and no audits on the existing risk. Risk Matrix & Training plan based on identified risk can be provided as evidence |



| | | | 4. All employees provided with necessary training and equipment. Policies and procedures dictate that all employees are to the lowest reasonable level provided with the protective equipment and training necessary to safely perform the functions tasks. | Risk Matrix available, Trainings related to Occupational Health and safety are mandatory to all employees, Hazards were identified and regularly and risk matrix was updated with new actions regularly Procedure of incident management system along with Risk Matrix and H&S training plan can be given as evidence |
|-----|---|-------------------------------|--|--|
| | | | 5. Procedures and machines are risk assessed and work procedures are present at every workplace. The risks are mitigated in the work planning phase. Safety risk assessment for all activities. Positive trend or risk mitigation present for last 3 years. | Risk assessed for all activities and mitigation plan prepared and actions were Monitored regularly, and results of the action is captured. This activity is performed for part three years and capturedRisk Matrix along with output of the actions taken (This can be explained with one example) and Positive trend of results captured for past three years (Can be Positive trend in H&S KPI of your organization) |
| 1.3 | How have you organized your HSE organization? | HAZARDS & RISKS MANAGEMENT | 1. No safety organization established. | No Safety Team form and organized |
| | Guides/Evidences: - Safety organization/ | | 2. Safety organization is established. Safety committee is appointed. | Safety Team is formed, they act only on reactive basis |
| | Committee. - Safety communications/ Review Meeting/ Improvements Plan, roles and responsibilities, staff for safety, staff for | | 3. Safety organization is established, sufficiently staffed and periodic meetings held for the safety improvement. | Safety is formed and proactive safety measure were taken based on the scope of work Safety organization chart (To understand the communication flow) can be provided as an evidence, MOM of safety meeting held |



| | environment management, ISO 45001 (OHSAS/18001), ISO 14000 certification by third party. | | 4. Management Reviews Meetings are carried out, all company personnel are informed, goal established and monitored through KPI. | Safety is one of the organizations KPI, it is reviewed regularly and Safety KPI is clearly informed to all employees Safety KPI Targets Vs actuals along with H&S policy and organization chart can be provided as evidence. |
|-----|--|-------------------------------|---|--|
| | | | 5. HSE certification in place, action plan established and monitored for improving gaps. The meetings results are documented, and improvements are presented for over 3 years period. | ISO certification or similar certification related to HSE in place, KPI Targets were set Year on year and improvements are captured ISO 45001 Certificate along with Improvement trend in Safety KPI for past 3 years can be provided as evidence |
| 1.4 | Is Risk assessment (Job Safety Analysis) carried out for your scope of activity? | HAZARDS & RISKS MANAGEMENT | Yes No N/A If the answer is yes, uploading evidence is MANDATORY (procedure, risk assessment matrix). | Risk assessment procedure and risk assessment matrix can be provided as evidence |
| 1.5 | Is your company able to provide the Legal Health & Safety compliance Matrix with respect to local | HAZARDS & RISKS MANAGEMENT | 1. No formal monitoring of the compliance with local Health & Safety legislation (ISO 45001:2018 item 6.1.3). | Legal compliance related to Health and safety were not monitored based on the scope of work |
| | regulations/requirements? Guides/Evidences: | | 2. Legal compliance matrix exist but not available to all countries where the company operates. | Process and procedure were followed for the scope of work in order to evaluate it is in line with government rules and regulations |



| | Legal requirements on safety legislation and on workers' rights Legal compliance Matrix. Reference: Local Regulations ISO 45001 6.1.3 (Determine Legal requirements and other requirements). | | 3. Legal compliance matrix can show all applicable legislation. Legislation include all countries where the company operates. Process implemented to perform periodically evaluation of new legislation. | Matrix with list of legislation followed for all the countries were the company operates is available Legal compliance matrix(for all countries of operation) or process and procedure to evaluate scope of work with Gov rules and regulation with respect to different countries of operation can be provided as evidence |
|-----|--|-------------------------------|---|---|
| | | | 4. Legal compliance matrix can show compliance with all legislation. Legislation include all countries where the company operate. Process implemented to perform periodically evaluation of new legislation. Audits performed to secure the compliance with the legislations. | Periodic verification on compliance with new Government rules and regulation as well as existing rules and regulationLegal compliance matrix along with Audit procedure on existing legal compliance and evaluation procedure for new legislations can be provided as evidence |
| | | | 5. There is a management system certified according to ISO 45001:2018 or OSHAS 18001:2007. There is a system that ensures that all documents and requirements are updated accordingly to new legal requirements and can identify if new versions are issued. | ISO 45001 or OSHAS 18001 certified and process available to identify revision on existing government rules and regulations ISO 45001 Or OSHAS 18001 certificate along with identification process of new changes on existing rules and regulation can be provided as evidence |
| 1.6 | How do you ensure your machinery/trucks/tools are safe to use? | HAZARDS & RISKS MANAGEMENT | 1. No Training/Instruction/certification in place. High risk to safety. | No primary measure was taken in order to ensure safe use of the equipment required for the scope of work |
| | Guides/Evidences: - Log copy of the last vehicle maintenance. - Training/ Calibration Tag/ certification/ Load test | | 2. Equipment inspection follows regional requirement. Training provided at the start of commissioning without certification refreshment program. No documented instructions in place | basic training on equipment safety is provided initially, no specific certificates available for the equipment usage |



| | - Daily operation check list - Hoisting equipment certificate | | 3. People are trained/certified to use lifting equipment/ crane/ forklift and standards in place of when to use and when not to use the equipment, part of internal audit program, equipment is being inspected by third party. | People handling the equipment's were trained/ certified on the usage of the equipment and equipment were inspected by third party regularly Training materials on equipment handling and third-party inspection certificate on equipment can be provided as evidence |
|-----|---|-------------------------------|---|---|
| | | | 4. People are trained/certified to use equipment, Procedures in place highlighting individual and cooperative responsibility, all lifting equipment are clearly marked "load "tested and when the next test will take place | People are trained on the equipment usage and Procedures for using the equipment are available and inspection details were marked in the equipment Training materials on equipment handling/ certificate along with Handling procedure of the equipment and inspection mark on the equipment can be provided as evidence |
| | | | 5. People are trained/certified to use equipment, proven 3 years record of lifting and transportation equipment maintenance system. | People are trained in equipment usage and equipment inspection activity is caried out for last three years continuously Training material on equipment usage along with 3 years inspection result on the equipment can be provided as evidence |
| | | | 6. Not applicable (Add a comment explaining why is not applicable is mandatory). | This question is not relevant to your scope of work (explain why it is not applicable) |
| 1.7 | What safety precautions are taken and/or observed | HAZARDS & RISKS MANAGEMENT | 1. No specific safety precautions are taken; safety is the individual own responsibility. | No precautions were taken |
| | during loading, craning, movements? | | 2. Basic lifesaving rules implementation is evident, management commitment to safety. PPE are handed out/required. | Basic training is given on loading and craning movements, Basis PPE are provided |



| | Guide/Evidence examples: Visual at the loading area, visuals, PPE usage, indicators when moving or craning | | 3. Potential risks are fenced in, people are using PPE, visuals aids are in place, safety instructions are frequently reviewed, safety walks are conducted, learnings are captured and shared, 4 eye principals are used when loading. Self-commitment is in place related to safety. | Risk were identified in the scope of work and PPE were provided based on the risks, safety instructions are available, Proper trainings were provided, Safety walks are conducted regularlyRisk assessment matrix with this specific scope of work and PPE matrix based on the risk of work and training materials can be provided as evidence |
|-----|--|-------------------------------|---|---|
| | | | 4. Audio and visual indications are in place when loading, temporary fence is set up, safe craning is ensured. | Audio and visual indicators are placed based on the risk identified on the scope of work, Loading and craning procedures are audited regularly procedures are training material explaining the usage of these indicators can be provided as evidence and Audit procedure on loading and craning movements |
| | | | 5. Proven 3 years record of maintaining high standard of safety environment for lifting and transportation equipment system. the system is reflected on activities. System is audited. | No safety incident or positive trend in safety incident recorded for last three years related to loading and craning movements. Incident register with details can be provided as an evidence |
| | | | 6. Not applicable (Add a comment explaining why is not applicable is mandatory). | This question is not relevant to your scope of work (explain why it is not applicable) |
| 1.8 | Workers are adequately trained before arriving onsite? Managers, supervisors, and workers understand the H&S | HAZARDS & RISKS MANAGEMENT | 1. Reactive behavior. Safety by instinct, compliance is the goal. Responsibility is delegated to safety manager. Lack of management involvement. | No trainings were given to workers prior arriving onsite, No involvement of management in safety requirements |
| | elements/programs and its roles and responsibilities in it? Does the supplier meet | | 2. Training, rules, procedures, supervisor control emphasis. Fear/discipline, expectations. | Basic training was provided and not work specific trainings were provided |



| | Vestas/GWO trainings requirements according to the scope? Guide/Evidence examples: - Training certificates; - Vestas Global Minimum | according to dri could de e examples: ficates; I Minimum bocontractor ents. 5. sta inc an an | 3. Independent behavior (individual driven/depending), person knowledge, commitment and standards, training matrix describing training certification and its expiration date. | Training matrix were prepared based on the scope of work and Training were scheduled based on that. Periodic monitor on certificate expiry is in place Training matrix along with training plan can be provided as evidence |
|-----|---|---|--|--|
| | Contractor/Subcontractor HSE Requirements. | | 4. Roles and responsibilities clearly defined and understood. Safety behaviors are clearly demonstrated on job sites. All safety trainings requested by Vestas (or GWO or equivalent) are in place. Rewards are given when good safety behavior is noticed. | Safety organization is clearly defined and H & S requirements are clearly communicated to all the employees, Safety trainings were provided to all kind of works and workers Safety trainings documents confirming the GWO or Vestas requirements along with training schedule can be provided as evidence |
| | | | 5. Proven 3 years record of maintaining high standard of safety behavior in place. No incidents records, training plan review annually, training matrix updated, audit report, action plan closed, | Regular Audit on training plan and no incident record or positive trend in incident record for past three years audit results and closure of action points identified and Positive Trend on incident Rates in past three years can be provided as an evidence |
| 1.9 | Are all employees trained in all required PPE including fall protection devices and the training material and usage instructions includes how to properly care, wear and use the personal | E including PROTECTIVE devices and aterial and ons includes ly care, wear ersonal ipment. Is ent in place assign to | 1. No, there is not a formal training for employees on PPEsIf the answer is YES, uploading evidence (examples: writing procedure, training logs, job the risk analysis) is mandatory | No trainings on PPE usage is provided |
| | protective equipment. Is there a document in place to identify and assign to workers the type of | | 2. YES, there is a formal training on PPEs but there is no procedures or Instructions on how to use them. | No PPE matrix available, only basic training is given without any formal training material |



| | equipment that needs to be used? | | 3. YES, there is a formal training on PPEs and procedures or Instructions on how to use them, but it is not always applied. | PPE Training procedures are available, Training not provided to all the employees, only for specific scope |
|-------|---|-----------------------------------|---|--|
| | | | | Training procedure can be provided as evidence |
| | | | 4. YES, there is a formal training on PPEs and procedures or Instructions on how to use them. It is always applied, and it is evidenced | PPE trainings procedures are available, and Training provided to all employees |
| | | | by training sheets. | Training procedure and training material along with training schedule can be provided as evidence |
| | | | 5. YES, there is a formal training on PPEs and procedures or Instructions on how to use them. It is always applied, evidenced by training sheets and it is verified by internal Audits. | PPE Training procedures available, training provided for all employees, periodic audits conducted on training schedule Training material and audit outcome can be |
| 1.10. | How do you ensure that | | | provided as evidence |
| 1.10. | every single employee and | COMMUNICATION, PARTICIPATION & | 1. No policy in place. | No policy in place and followed |
| | sub-contractor is familiar with the Occupational | CONSULTATION & | 2. Environment and health Policy in place. No evidence of training. | Policy in place but no system to make sure employee and subcontractor awareness |
| | Health and Safety and the Environment policy? | | 3. Targets and strategy for policy deployment defined. All employees trained in basic understanding of E /OH&S policy. | Policy in place, H&S targets are defined, and basic training given to all employees |
| | | | | Health and safety policy along with training material can be provided as evidence |



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| | | | 4. Risks and Impacts are widely communicated and understood across the organization including subcontractors. | Health and safety targets are set, Risk were identified and corresponding mitigation plan in place and it is communicated to all the employees in organization as well as subcontractors Risk Matrix, H&S target of the year along with procedure explaining how this communicated to employees and subcontractors can be provided as evidence |
|------|---|---|--|---|
| | | | 5. Targets are visible and displayed throughout the company. Effectiveness of the training in place and improvements in the target for the last three years | Health and safety targets are communicated and clearly displayed in different areas of the organization and it is connected to Safety KPI of the company and there is positive trend in H&S KPI for the last three years H&S targets along with data showing increase trends of safety KPI for the past 3 years can be provided as evidence |
| 1.11 | Does your company hold periodic safety meetings at the company, project or department level? | COMMUNICATION, PARTICIPATION & CONSULTATION | 1. No meetings are established | No practice of having meetings |
| | | | 2. It is not defined in procedures but there are MOMs of safety meetings held in the last 12 months | H&S is not a primary KPI, Issues are handled only in the reactive mode, Meeting are held only when there is a requirement |
| | | | 3. Regular internal safety meetings of the company are held, led by management | H&S organization is structured, Regular meeting are held by management |
| | | | | MOM of Regular safety meeting held, and meeting schedule can be provided as evidence |



| | | | 4. Regular safety meetings are held. management leads them. In the same way, on site every day a company-specific Toolbox is made | Meeting are held at management level as well as in every department Management Meeting schedule of safety and department meeting schedule on safety can be provided as evidence |
|------|--|--|---|--|
| | | | 5. Monthly safety meetings are held by management and the MoM is sent to the entire organization. Each manager completes the status of the action assigned to him and it is discussed internally. There is a procedure that defines the periodicity, content and those responsible for closing the actions. | Based on the Outcomes of the safety management meeting, Person responsible is assigned for every risk identified to proceed with action plan with targets dates Person responsible for idented Risks along with action plan(This can be explained with one specific example)- This could be provided as evidence |
| 1.12 | How is your Emergency Response and Recovery Plan, prepared? I.e. injuries, fire, environmental. | EMERGENCY MANAGEMENT | 1. No evidence of a formalized and implemented response and recovery planning in place. | No Emergency and recovery plan in place |
| | Guides/Evidences: - Emergency Process - Emergency response Team designed and recovery Plan. Evidence of scenario | s/Evidences: gency Process gency response Team ed and recovery Plan. ice of scenario | 2. There is an incident response and recovery plan in place, only fire and evacuation drills are part of that. Response Team in place to handle all natural and manmade disasters with a recovery plan. | Generic Emergency response & recovery plan in place, responsibilities defined for personals. |
| | Analysis | | 3. There is a formalized process for recovery which is being reviewed yearly (covering identification of risks and threats to the business) People and prioritization of products and services are aligned with business continuity plan. | Risk were identified in the scope of activity and Response plan is formulated based on risk analyses, Audits performed to review the response plan yearly Risk matrix along with response and recovery plan and audit outcome on emergency responses and recovery plan can be provided as evidence |



| 4. There is a formal proactive scenario analysis in place covering loss of data, loss of communication, loss of technology, for all natural and manmade disaster. Response team is trained in the recovery plans, notification, escalation, and declaration is in place. | Scenario analysis in place and Training provided to emergency response team Training material and scenario analysis can be provided as evidence |
|--|---|
| 5. There is a formal process and action Plan for all identified threats in place. Proven effectiveness records for last 3 years exist. | Risk identification and recover plan based on it is followed for part three years outcome of action plan on identified risk for past three years (an example for each year) can be provided as evidence |



| the last 3 years: - Number of days of leave for each labor accident regarding the last 3 years: - Number of accidents with medical leave in the last 3 years: - Number of First Aid cases in the last 3 years: - Number of Near Misses cases in the last 3 years: - Number of Environmental Incidents in the last 3 years: - Total number of employees - Total annual manhours worked - LTIR for the last 3 years: - TIR for the last 3 years: - TIR for the last 3 years: Guides/Evidences:TRI R = ((Reportable Incidents)* 1.000.000)/ Total Working Hours Incidence rate in the last 3 years: LTIR= ((lost time)* 1.000.000)/ Total Working Hours | of days of leave for each |
|---|---------------------------|
|---|---------------------------|



| 1.14 | Does your company register incidents and have an incident investigation process? Does your company have a management review | d have an INVESTIGATION | 1. No. No, we do not manage/register incidents. Not able to calculate rates. | No Incidents were recorded, and no actions were taken |
|------|--|----------------------------|---|---|
| | | | 2. Limited registration. Yes, we manage incidents data but not all of them | Only Major Incidents were recorded, Action plan Is limited but without any targets defined |
| | process for incident investigation outcomes? and Are there actions plans for improvement developed as a result? | s for ed as n ion | 3. Extensive registration. Registration of accidents, near misses and hazardous observations. But no formal investigation procedure in place. | All the Incidents were recorded, but actions were taken to mitigate but not in a structured format (No formal procedure) Incident register can be provided as evidence |
| | a result? Guides/Evidences: - Accident investigation procedures, investigation reports / records | | 4. Extensive registration and follow-up. Registration of accidents, near misses and hazardous observations. Incidents are followed up by documented corrective and preventive actions. | All Incidents were recorded, Action plan in place for all the incidents and status is monitored on the action plan, Preventive measures were defined Incident Action plan and preventive measures defined can be provided as evidence |
| | | | 5. Documented decrease of accidents. Yes, we can provide incidents data, Rates calculation and evidences of Injury management like root cause techniques documented and action plans are available. Documented decrease in the number of accidents and/or other health and safety indicators. | Decrease in Incidents for the past three years, action plan in place for all the incidents, Root cause analysis to find the cause of the incident, Preventive measures taken based on the root cause analysis outcome Documented data on incidents for past three years, root cause analysis procedure for incidents Can be provided as evidence |
| 1.15 | Are the root causes determined for the | INCIDENT INVESTIGATION | 1. No evidence on incident investigation | No Incident Management system followed |



| | incidents? Is there a corrective action taken for the root causes identified following the Hierarchy of controls? Do first line managers and senior managers take active part in reporting and investigation? | | 2. Investigation procedures are in place but limited evidence that its applied with RCA tools and action plan - also no multi- disciplinary team involved. | follow only generic root cause analysis procedure, there is no documented procedure |
|------|--|-----------------------------|--|--|
| | | | 3. Investigation procedure in place with some root cause analysis tools identified. Some multi-disciplinary team involvement and weak action plan control. | root cause analysis is place for only major incidents identified. root cause analysis procedure can be provided as evidence |
| | | | 4. Investigation procedure and root cause analysis structure in place and evident that its deployed in most of the cases. Some multi- disciplinary team involvement and action plan are followed systematically. | RCA in place for all the incidents identified and action plan in place based on the outcome of the RCA RCA procedure along with corrective action planed (can be explained with 2-3 examples). This can be provided as evidence |
| | | | 5. Full investigation process and root cause analysis structure in place and deployed, multi-disciplinary team involved in the investigation and documented decrease in the number of the incidents in the last 2-3 years. Action plan and mitigation action are recorded and implemented. | RCA in place for all the incidents, corrective action in place, decrease in number of incidents for past 3 years Data showing decrease in number of incidents along with number of incidents can be provided as evidence |
| 1.16 | Are the functions and responsibilities of the site's | ROLES & RESPONSIBILITIES | 1. No responsibilities defined | No Health and safety team or Organization in place |
| | HSE management defined, approved and documented | | 2. There is not a formal definition into the company process, only the knowledge | Basic idea of HSE given to employees, no procedures or process defined |





| | through a matrix of HSE system element owners and HSE responsibilities (including delegation of authority in the case of absence)? | | 3. Responsibilities defined and included into a specific process. Responsibilities communicated & signed by the worker. | HSE organization defined, Responsibility communicated to the Team HSE organization structure along with HSE training provided to the employees (training material) can be provided as evidence |
|------|---|-----------------------------|--|---|
| | | | 4. Responsibilities defined, informed and signed. Matrix defined to know the responsible/leads of the process and delegation | Responsibilities are well defined, specific HSE training given to all the members of the team, Clear HSE responsibility matrix in place which is visible to all the employees HSE responsibility matrix along with Training |
| | | | | planned(Training schedule and Material) can be provided as evidence |
| | | | 5. Responsibilities defined, informed and signed. Matrix defined. A periodic control of its implementation is carried out by management and monitoring of annual indicators | Responsibilities are well defined, specific HSE training given to all the members of the team, Clear HSE responsibility matrix in place which is visible to all the employees, HSE review meetings were conducted in order to monitor the HSE organization |
| | | | | MOM of review meetings and action plan defined based on the outcome can be provided as evidence |
| 1.17 | Do you have any previous experience with the wind industry? Guide/Evidence examples: | WIND BUSINESS EXPERIENCE | No Yes, in the last year Yes, in the last 3 years Yes, in the last 5 years Yes, more than 5 years | Evidences: List of customers along with the engagement and completion date and person contact; PO copy can be provided as evidence |
| | PO copy, Customer credentials | | 6. N/A | |



| 1.18 | Do you consider the timing for getting local visa and work permissions during the project planning? | VISA & PERMITS | 1. Yes2. Nolf response is YES, then all data shall be informed. | If Yes, kindly share the past project plan with your pat customer and highlight it were these timing was included.(You can mask the non-disclosable information in any) |
|------|--|---|--|--|
| 2 | QUALITY MANAGEMENT SYST | EM | | |
| 2.1 | How do you demonstrate commitment to Quality? Guides/Evidences: | QMS | 1. No commitment. | No Evidence of Quality Implementation |
| | Quality Policy. Mission & Values. Procedures. Quality KPI. | Quality Policy. Mission & Values. Procedures. | 2. Quality is recognized but only at the reactive mode. Understanding and adherence to standards is moderate and integration into formal processes and strategies is limited considerations are part of most day-to-day processes. | Quality Policy is established |
| | | | 3. Quality is well understood and supported by all employees. Quality targets are set but considered less important for some areas. | Evidences: Quality Policy and communication evidence to all employees, Quality Objectives available for key areas/ functions |
| | | | 4. There is strong commitment to Quality at all levels of the organization. Quality targets are broadly set and considered as important as other business-related targets. Quality | Evidences: Quality Policy and communication evidence to all employees, Quality Objectives included in the overall business KPI |
| | | | 5. There is a uniform and strong commitment to Quality at all levels of the organization. Quality plays an important role in long-term vision definition. Quality targets are universally communicated and connected to compensation in the organization. There is a strong proactive approach to Continuous Improvement. | Evidences: Quality policy and communication evidence to all employees, Quality vision statements, Continuous improvement plan and procedure |



| 2.2 | Do you have a Quality Management System? | QMS | 1. No Quality System Management in place. | No Evidence of Quality Implementation |
|-----|--|------------------------------|--|---|
| | Guides/Evidences: ISO 9001 Certificate, process mapping, | | 2. There is a Quality System Management in place, but not covering all process. | Evidences: Basic Quality Manual |
| | procedures master list | | 3. There is a Quality System Management in place, but it is not followed all the time. | Evidences: Company Quality Manual covering all process |
| | | | 4. There is a Quality System Management implemented and it is followed all the time. There is an internal audit implemented and its results are monitored but not third part certified. | Evidences: Company Quality Manual covering all process, Internal Audit Plan and Results |
| | | | 5. There is an ISO 9001:2015 Quality System Certified by a third part | Evidences: ISO Certification |
| 2.3 | How is NC handled and controlled? | NON-CONFORMITY MANAGEMENT | 1. NC handling process not in place | No Non-Handling Practice in Place |
| | Guides/Evidences: Non-conformance handling process. NC Control (pareto, etc.) KPIs Internal audits Action Plan | conformance handling ess. | 2. NC handing procedure is in place. Partial NC's Registration is in practice. | Nonconformance Handling procedure, NC Summary is available for only Significant Non conformance |
| | | | 3. NC Procedure in place describing format and techniques to be used on problem Solving (i.e. 8D, Ishikawa, 5Whys), NC registration for all NCs, Action plan evidence. No communication on NC's within organization. | Evidences: Non-Conformance Handling Procedure, NCR Format, NC Action Progress Summary |



| | | | 4. NC Procedure in place describing format and techniques to be used on problem Solving (i.e. 8D, Ishikawa, 5Whys), Action plan evidence. NC registered and communicated internally. Internal Audits demonstrates full implementation of NC handling process. | Evidences: Non-Conformance Handling Procedure, NCR Format, NC Action Progress Summary, NCR Communication Flow, Internal Audit Report |
|-----|--|---------------------------|--|---|
| | | | 5. NC Procedure in place describing format and techniques to be used on problem Solving (i.e. 8D, Ishikawa, 5Whys), Action plan evidence. NC registered and communicated internally. Internal Audits demonstrates full implementation of NC process Results are critically reviewed by management and continual improvement plan is in place to prevent NC's on similar processes. | Evidences: Non-Conformance Handling Procedure, NCR Format, NC Action Progress Summary, NCR Communication Flow, Internal Audit Report, Management review and Continuous improvement plan |
| 2.4 | How do you plan and implement continuous improvement? | CONTINUOUS IMPROVEMENT | No plan available. Continuous improvement plan is available, but actions taken on reactive mode. | No continuous Improvement Plan |
| | Guide/Evidence examples: Continuous Improvement management process | | 3. Commitment to improvement goals are demonstrated. Activities in progress in several areas to achieve goals. Metrics for improvement are being monitored. Beginning cross-functional integration. | Evidences: Continuous improvement procedure and Plan |
| | | | 4. Formal continuous improvement program with cross-functional integration. Multiple improvement efforts are in progress with demonstrated progress towards goals. | Evidences: Continuous improvement procedure and Plan with Targets |



| | | | 5. Documented multi-year plan and dedicated organizational structure supports continuous improvement. CI is self-sustaining and is achieving aggressive improvement goals. | Evidences: Continuous improvement procedure and Plan with Targets for next few years |
|-----|--|---------------------------|---|--|
| 2.5 | Do you measure your quality performance? If yes, please provide evidence. Guide/Evidence examples: Score Board/Dashboard | QMS | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Evidences: Company QPI KPI Target vs Actual |
| 2.6 | How do you handle customer complaints and ensure customer | CONTINUOUS IMPROVEMENT | 1. No process / procedure for customer complaints handling or customer satisfaction. | No Evidence |
| | satisfaction? Guide/Evidence examples: Customer complaints | | 2. Informal communication about customer complaints within organization. Actions are partially implemented. | Evidences: Customer complaints handling evidence, with no structure |
| | handling & customer satisfaction | | 3. Customer complaints handling procedure is in place and are being registered in structured format. Actions are effectively implemented for customer complaints. | Evidences: Customer Complaints handling Procedure, Format, Action progress summary |
| | | | 4.Customer satisfaction survey is happening for all customers. Customer complaints are being monitored in structured format and meetings are in place to communicate customer complaints. 8D problem solving method is in place to analysis all customer complaints in effective manner | Evidences: Customer Complaints handling Procedure, Format in 8D, Action progress summary, Customer Satisfaction Survey |



| | | 5. Customer satisfaction feedback are being analyzed and actions towards improve the satisfaction index rate. Statistical analysis positive trend is in place for customer satisfaction. Bench marking analysis is in place to exceed customer satisfaction | Evidences: Customer Complaints handling Procedure, Format in 8D, Action progress summary, Customer Satisfaction Survey, Survey results vs Targets and action plan |
|---|--|--|---|
| How are audits planned and are they performed on a regular basis? | INTERNAL AUDITS | 1. No internal quality system audits being conducted. | No Internal Audit Procedure |
| Guide/Evidence examples: | | 2. Random audit conducted on need basis. | Random Audit Evidences |
| Internal Audit procedure | | 3. Quality system internal audits being conducted as per plan. Auditors independent of audited areas. | Evidences: Internal audit plan vs actual, |
| | | 4. Quality system internal audits being conducted as established on the documented procedure in all areas. Root cause and corrective action is being addressed with no past due responses | Evidences: Internal audit plan vs actual, Corrective action taken within time |
| | INTERNAL AUDITS | 5. Quality system internal audits being conducted as established on the documented procedure in all areas. Root cause analyses and corrective actions completed and verified. Improvement targets set and clear progress shown. | Evidences: Internal audit plan vs actual, Corrective action taken within time. Improvement plan available |
| | are they performed on a regular basis? Guide/Evidence examples: | are they performed on a regular basis? Guide/Evidence examples: Internal Audit procedure | Analyzed and actions towards improve the satisfaction index rate. Statistical analysis positive trend is in place for customer satisfaction. Bench marking analysis is in place to exceed customer satisfactionHow are audits planned and are they performed on a regular basis?INTERNAL AUDITS1. No internal quality system audits being conducted.Guide/Evidence examples: Internal Audit procedureINTERNAL AUDITS2. Random audit conducted on need basis.3. Quality system internal audits being conducted as per plan. Auditors independent of audited areas.3. Quality system internal audits being conducted as established on the documented procedure in all areas. Root cause and corrective action is being addressed with no past due responsesINTERNAL AUDITS.S. Quality system internal audits being conducted as established on the documented procedure in all areas. Root cause and corrective action is being addressed with no past due responses |





| 3.1 | Does the company have an Employee Code of Conduct and supporting policies and procedures? Guide/Evidence examples: Code of Conduct, Code of ethics, policies | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence is mandatory. | Acceptable evidences are: 1. Company/Employee Code of conduct 2. Guides/Procedures related to code of conduct, ethics etc. |
|-----|--|-----------------|---|--|
| 3.2 | Does the company have a Supplier Code of Conduct? Guide/Evidence examples: Supplier code of conduct, policies and procedures | CODE OF CONDUCT | Yes - If your answer is YES or N/A: uploading evidence and explanation is mandatory. No Not Applicable | Acceptable evidences are: 1. Supplier code of conduct 2. Guides/Procedures related to code of conduct for suppliers, ethics etc. |
| 3.3 | Does the company conduct due diligence on its suppliers and subcontractors to monitor whether they are complying with the Supplier Code of Conduct and/or applicable human rights, labor rights, health & safety, environment and anti- bribery standards? Guide/Evidence examples:Supplier Audit/Assessment check list and monitoring procedure/system | CODE OF CONDUCT | Yes - If your answer is YES or N/A: uploading evidence and explanation is mandatory. No Not Applicable | Acceptable evidences are: 1. Evaluation procedure for your suppliers.2. Supplier Contract, supplier quality assessment procedures, guides. |



| 3.4 | Does the company have a formalized policy/procedure ensuring that each employee at the company is employed at his or her own free will? | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Employee contract/ offer letter 2. Procedures/ policies |
|-----|--|-----------------|---|--|
| | Guide/Evidence examples: Policies, procedures, Modern Slavery Act Statement | | | |
| 3.5 | Does the company have a formalized policy/procedure in place ensuring that employees working hours and overtime are in compliance with applicable laws, industry standards or relevant collective bargaining agreements? | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Employee contract/ offer letter 2. Procedures/ policies 3. HR policy |
| | Guide/Evidence examples: HR policies, HR procedures | | | |



| 3.6 | Does the company have a formalized policy/procedures ensuring that any form of deposit, recruitment fee, or equipment advance from employees either directly or through recruitment agencies, is not happening? Guide/Evidence examples: Policy, contract with recruitment agencies, assessment result | CODE OF CONDUCT | Yes No Not Applicable (Add comments if you choose this answer is mandatory). If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Employee contract/ offer letter 2. Procedures/ policies 3. HR policy 4. Interview process reports. |
|-----|--|-----------------|---|---|
| 3.7 | Does the company you have formalized policy/procedures ensuring all employees are paid according to the applicable laws, industry standards or relevant collective agreements and at least the minimum wage?Guide/Evidence examples:HR Policy, HR procedures(Important: must comply with the laws in the country where operating) | CODE OF CONDUCT | YesNolf your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Employee contract/ offer letter. 2. Procedures/ policies 3. HR policy |



| 3.8 | Are all employees provided with an understandable salary statement that includes regular and overtime hours worked, regular and overtime earnings and deductions? Guide/Evidence examples: HR policy and procedures, pay slip | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Pay slip. 2. Offer letter/Employee contract 3. HR policy |
|-----|--|-----------------|---|--|
| 3.9 | Do you have a formal policy/procedure ensuring all employees hired in the company above the age of 15 or older if local law requires? Guide/Evidence examples: Employment policies and procedures | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Employment Policies 2. Offer letter/Employee contract 3. HR policy |



| 3.10. | Does the company have a formalized policy/procedures prohibiting workplace discrimination, sexual and physical harassment, mental, physical or verbal abuse, coercion or intimidation in any circumstance in the workplace? Guide/Evidence examples: HR Policy and procedures, escalation channel, whistleblower hotline | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Escalation channel, whistle blower system 2. Employee contract 3.HR policy |
|-------|--|-----------------|---|--|
| 3.11 | Does the company support and enable workers' rights to freely associate and collectively bargain without unlawful interference? Guide/Evidence examples: Policies, procedures, escalation channel, whistleblower hotline | CODE OF CONDUCT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Escalation channel, whistle blower system 2. Employee contract 3.HR policy |



| 3.12 | Does the company have formal policy, procedures and systems in place to prevent corrupt practices?Guide/Evidence examples:Policies and procedures, whistleblower procedure | CODE OF CONDUCT | YesNolf your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Whistleblower system 2.HR policy |
|------|---|-------------------------------|---|--|
| 3.13 | Does the company have a grievance mechanism in place for employees to raise their concerns and complaints, without fear of retaliation? | ETHICS LINE | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Whistleblower system 2. Hotline for grievance |
| | Guide/Evidence examples: Whistleblower hotline or system | | | |
| 4 | ENVIRONMENT | | | |
| 4.1 | Is your company able to provide the Legal Environment Compliance | HAZARDS & RISKS MANAGEMENT | 1. No formal monitoring of the compliance with local environmental legislation (ISO 14001:2015 item 6.1.3). | 1.No monitoring procedure about legal compliance or documents. |
| | Matrix with respect to local regulations/requirements? Guides/Evidences: | | 2. Legal compliance matrix exist but not available to all countries where the company operates. | Evidence: Legal compliance matrix for one/parent company. Not available for other regions. |
| | Legal requirements on environment and on handling of chemicals Legal compliance Matrix. | | 3. Legal compliance matrix can show all applicable legislation. Legislation include all countries where the company operates. Process implemented to perform periodically evaluation of new legislation | Evidence: Legal compliance matrix for all the countries of operation. |



| | Reference: Local Regulations | | 4. Legal compliance matrix can show compliance with all legislation. Legislation include all countries where the company operate. Process implemented to perform periodically evaluation of new legislation. Audits performed to secure the compliance with the legislations. | Evidence: Legal compliance matrix and illustrate how you establish audits and update of the new legislations. |
|-----|---|-------------------------------|---|---|
| | | | 5. There is a management system certified according to ISO 14001:2015. There is a system that ensures that all documents and requirements are updated accordingly to new legal requirements and can identify if new versions are issued. | Evidence: Systems related to Legal compliance matrix with regular evaluation. |
| 4.2 | Does the environmental management system identify norms/procedures to manage impacts on/supervision of biodiversity, air and soil quality, lake, streams and groundwater? Guide/Evidences: ISO 14001: 2015 | HAZARDS & RISKS MANAGEMENT | Yes No N/A If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Environmental Management system 2. Procedure/ policy 3. Report on environmental data. |
| 4.3 | Have the environmental aspects related to activities and services been determined? What are the criteria used to evaluate the Significant environmental aspects? | HAZARDS & RISKS MANAGEMENT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Procedure/ policy 2. Environment Management system 3. Evaluation of environment aspects |



| 4.4 | How is Waste (hazardous, recyclable, combustible, landfill) handled and stored?Guide/Evidence examples:Waste management process/ | WASTE MANAGEMENT | 1. Waste is not managed and there is a risk of polluting the surroundings | No waste handling/managing procedure. |
|-----|---|---------------------|--|--|
| | Evidence on shop floor/ scrap area | | 2. Waste is partially managed, collected and disposed of in a legal manner. | No Data Maintained |
| | | | 3. Waste is managed, collected and disposed of in a legal manner. No risk of polluting the surroundings. | Evidence: Waste management system and explain how it is not polluting the surroundings. |
| | | | 4. Waste Management System is fully implemented, maintained and continuously improved. No risk of polluting the surroundings | Evidence: Waste management system and continuous improvement plan/policy |
| | | | 5. Waste Management System is fully implemented, maintained and continuously improved. Over 3 years documented continuous improvement of waste management system in place. | Evidence: Waste management system and previous 3 years of improvement plan/records for waste management |
| | | | 6. Not applicable (Add a comment explaining why is not applicable is mandatory) | Detailed explanation as to how it is not applicable |
| 4.5 | Can you deliver environmental data per type of service you offer (waste (type, amount, treatment); fuel (type, amount for transport, generators, etc.); chemical usage (MSDS, usage, amount)? If yes, please upload a copy of the latest submitted report or data | WASTE MANAGEMENT | Yes No If your answer is YES: uploading evidence and explanation is mandatory. | Acceptable evidences are: 1. Evidences of usage of resources and their direct or indirect impact level to the environment. |





| 4.6 | 4.6 Does the company register environmental incidents (accidents, near misses and hazardous observations), and are there action plans for improvements? | HAZARDS & RISKS MANAGEMENT | 1. No registration of accidents. | 1. No register or recording of accidents/incidents |
|-----|--|-------------------------------|--|---|
| | | | 2. Registration of accidents and near misses. | 2.Major accidents are noted and maintained in a separate register. Acceptable Evidence: 2. Simple registers for major accidents and near misses |
| | | | 3. Registration of accidents, near misses and hazardous observations. All Accidents are followed up by documented corrective and preventive actions | 3. All accidents are registered corrective and preventive actions are taken. Acceptable Evidence: Incident register and Incident Investigation Procedure |
| | | | 4. Documented decrease in the number of accidents and/or other Environmental indicators. | 4. Register of accidents directly influencing in the decrease of accident numbers e.g.Acceptable Evidence: Accident trends/ records |
| | | | 5. Procedure in place describing format and techniques to be used on problem Solving, Action plan evidence. Incidents opened as NC registered and communicated internally. Internal Audits demonstrates full implementation of NC CAPA report. Results are critically reviewed by management and continual improvement plan is in place to prevent incidents on similar processes. | 5. A clear system/ procedure for recording accidents linked with improvement plans Acceptable Evidence: 5. / KPI / NC CAPA report with which an action plan is developed. |



| 4.7 | chemicals and other STORAGE | HANDLING & STORAGE OF CHEMICALS | 1. Chemicals and other dangerous substances are not stored or handled correctly. High risk of environmental accidents that can affect human safety, local community or environment. | No datasheets available, no handling procedure for chemicals. |
|-----|---|---------------------------------------|--|--|
| | labeling of containers chemical name and hazard warning, risk of spill and combine chemicals. Handling dangerous goods certificate monitoring of | | 2. There are special guidelines in place for handling and transportation of dangerous goods. Minor lack of control in storage and handling of chemicals and other dangerous substances. | Basic guidelines but process not fully defined. Not in a documented format |
| | each driver | | 3. Procedures in place. Plans for improvement and ongoing implementation is demonstrated. No evidences of nonconformity to standards observed. | Evidence: Guides/ procedures, improvement plans related to chemical storage and handling. |
| | | | 4. Procedures in place and Certificates for handling dangerous goods are monitored and renewed systematically by the company, all relevant personnel are trained and frequently refreshed. Visual aids are in place to secure a simple way of handling and packing dangerous goods. Chemicals stored in a dedicated chemical storage area with secondary containment and necessary emergency equipment. | Evidence: Well defined system provided with guides / procedures with proper trainings and a particular place for storage and handling. |



| | | | 5. Procedures and Handling Certificates are in place. Complete control. The facility maintains a complete, regularly updated inventory of hazardous materials. Reports and records prove reduced risk related to handling of dangerous goods for period of last 3 years. | Evidence: Certified system, regular monitoring and a process to reduce risk. |
|-----|--|---------------------------------------|---|--|
| | | | 6. Not applicable (Add comment explaining why is not applicable is mandatory). | Evidence: Provide detailed explanation as to why it is not applicable related to your scope of work |
| 4.8 | How do you ensure that safety datasheets are present, updated accessible and readable for the operators? | HANDLING & STORAGE OF CHEMICALS | 1. Datasheets are not present or accessible for the operator | No Data Sheets Available |
| | Guide/Evidence examples: MSDS, SDS or similar, Safety datasheet storage and handling | | 2. Some datasheets present. Documents are in local language, access to the safety datasheet is limited. | Evidence: Safety datasheets which is very basic. |
| | | | 3. Datasheets are present, process to secure validity of the safety sheets are in place. | Evidence: Datasheets which are maintained regularly by a process. |
| | | | 4. Datasheets are updated and are available in the areas where the product is being used and stored. | Evidence: Datasheets which are available in the place of use. |
| | | | 5. All Datasheets are updated, available and are reviewed yearly and prior to updates of the chemicals. Refreshing program for the users are in place with evidences for over 3 years. | Evidence: Datasheets which are actively maintained, reviewed and updated regularly. |
| | | | 6. Not applicable (Add a comment explaining why is not applicable is mandatory). | 6.Detailed explanation as to how it is not applicable |





| 4.9 | 4.9 How do you ensure that you avoid using black-listed material?Access the link and go to the "MANAGE CHEMICALS" session to download the 02 pdf files. | HAZARDS & RISKS MANAGEMENT | 1. No blacklisted material knowledge. | No awareness on block listed material |
|-----|--|-------------------------------|--|---|
| | Please review in order to provide your answer: https://www.vestas.com/en /about/sustainability#!resp | | 2. Black-Listed material are known, and suppliers informed, but there is no monitoring or no actions or plans in place. | Blacklisted material is available but no influence in the service/work (Basic Knowledge available) |
| | onsibility-governance Guides/Evidences:List of blacklisted materials/ procedures | | 3. Suppliers are informed about and monitored for black-listed materials. Some suppliers use chemical compounds included on the blacklist, but there is a plan for their substitution. | Evidences: Procedures covering the substitution/handling of blacklisted materials |
| | | | 4. Suppliers do not use any unwanted chemical (nor any grey-zone chemicals). | Evidences: Aware of blacklisted material and don't use them in service/work |
| | | | 5. Suppliers are informed and monitored about black-list materials in a systematic and periodic way documented for last 3 years. | Evidences: Proper documentation, monitoring for the usage of blacklisted materials by the suppliers. |
| | | | 6. Not applicable (Add a comment explaining why is not applicable is mandatory). | 6.Detailed explanation as to how it is not applicable |
| 5 | SUPPLY CHAIN MANAGEMENT | Г | | |
| 5.1 | What kind of evaluation and criteria is used for supplier selection? | SUBCONTRACTOR MANAGEMENT | No supplier selection process formally defined or QHSE supplier evaluation process in place. Not Applicable (Adding comments if you choose this answer). | No Supplier Selection Procedure Available |
| | | | 2. Supplier selection procedure is available and practiced for critical suppliers. There is an informal QHSE supplier evaluation process in place. | Supplier Selection procedure, Evidences available for critical Supplier Only |





| | | | 3. All suppliers qualified through formal supplier selection procedure. There is a formal documented QHSE supplier evaluation process in place. | Evidences: Supplier Selection Procedure, QHSE Supplier evaluation report |
|-----|---|-----------------------------|--|--|
| | | | 4. There is a formal documented QHSE supplier evaluation process in place. KPI can demonstrate supplier QHSE performance management. Internal QHSE audit demonstrates full process implementation. Database with the results of evaluation for each supplier can be demonstrated. | Evidences: Supplier Selection Procedure, QHSE Supplier evaluation report, Supplier QHSE performance target |
| | | | 5. There is a formal documented QHSE supplier evaluation process in place. KPI can demonstrate supplier QHSE performance management. Internal QHSE audit demonstrates full process implementation. Supplier performance results, KPI and internal audit results are reported and discussed with its management. Continuous improvements actions are defined and implemented. | Evidences: Supplier Selection Procedure, QHSE Supplier evaluation report, Supplier QHSE performance target, Continuous improvement plan |
| 5.2 | How do you ensure that every single contractor and subcontractor employee have the necessary training regarding to Safety and | SUBCONTRACTOR MANAGEMENT | No QHSE process/policy/system in place There is an informal QHSE process/policy/system in place. Not Applicable (Adding comments if you choose this answer). | |
| | Quality, in order to carry out his position without putting himself or the team at risk, and is aware about all the | | 3. There is a formal QHSE process/policy/system in place, but it is not followed all the time. | Evidences: supplier QHSE policy acknowledgement by Supplier |



| | QHSE processes that must apply to their activity?. | 4. There is a formal QHSE process/policy/system in place, and it is followed all the time. | Evidences: supplier QHSE policy acknowledgement by Supplier, Training evidences | |
|-----|--|--|---|--|
| | Guides/Evidences: Environmental and health policy/ QHSE procedures and training | | 5. There is a formal QHSE process/policy/system in place, it is followed all the time, KPI are visible and displayed throughout the company, effectiveness of the training in place and improvements in the target for the last three years, management review the results and the process is monitored through internal audits. | Evidences: supplier QHSE policy acknowledgement by Supplier, Training evidences, Supplier Audit Evidences |
| 5.3 | How is it ensured that a complete Induction Training of the project is provided to all subcontractors and that the process is documented? | SUBCONTRACTOR MANAGEMENT | There is no formal induction training for contractor/subcontractor. There is an informal induction training for contractor/subcontractor. Not Applicable (Adding comments if you choose this answer). | |
| | Guides/Evidences: Induction training material, training procedures and training matrix for contractors/subcontractors and evidence of completion. | | 3. There is a formal induction training for contractor/subcontractor, but it is not applied all the time. | Induction Training Evidences |
| | | | 4. There is a formal induction training for contractor/subcontractor in place and it is applied all the time. | Training Evidences for all the time |
| | | | 5. There is a formal induction training for contractor/subcontractor in place, it is applied all the time, training logs signed off by the trained employees, training matrix updated and available, effectiveness of the training is verified through internal audits. | Training Evidences for all the time, Attendance sheet, Training Matrix (Plan vs actual), Job observation sheet |





| 5.4 | How does your company ensure that the customer 's QHSE requirements are incorporated into the subcontractor' s | SUBCONTRACTOR MANAGEMENT | QHSE requirements/policy not formally stated to the supplier Not Applicable (Adding comments if you choose this answer). | No Evidence available |
|-----|--|---------------------------------------|---|--|
| | agreements? Guides/Evidences: Customer requirements critical analysis, | | 2. QHSE requirements/policy stated on the documentation sent to supplier but not evidence of supplier commitment to follow the statements | Evidence of Customer QHSE Communication to Supplier |
| | subcontractor agreement copy & compliance to agreement. | | 3. QHSE requirements/policy stated on the signed contracts with the suppliers | Evidences: Supplier signed QHSE Policy |
| | ugreentent. | | 4. QHSE requirements/policy stated on the signed contracts with the suppliers + Audits in the suppliers performed to verify if requirements are continually followed | Evidences: Supplier signed QHSE Policy, Supplier Audits capturing the adherence |
| | | | 5. QHSE requirements/policy stated on the signed contracts with the suppliers + Audits in the suppliers performed to verify if requirements are continually followed + Formal documentation of improvement in the supplier related to QHSE requirements/policy can be demonstrated. | Evidences: Supplier signed QHSE Policy, Supplier Audits capturing the adherence, and Improvement plans to achieve them |
| 5.5 | Do you have a process of supplier's performance monitoring? | SUPPLIER PERFORMANCE MONITORING | No Supplier evaluation process formally defined. Not Applicable (Comments explaining why it is not applicable is mandatory). | No System in place |
| | Guide/Evidence examples: Supplier performance | | 2. Supplier evaluation process formally defined. Frequency of evaluation not always followed or not defined. | Supplier Performance Evaluation Procedure and Evidences |



| | review, Scorecard, Supplier Assessment check list | | 3. Supplier evaluation process formally defined. Frequency of evaluation is followed. | Supplier Performance Evaluation Procedure and Evidences, Plan vs Actual |
|-----|---|---------------------------------------|---|---|
| | | | 4. Supplier evaluation process formally defined. Frequency of evaluation is followed. KPI developed to monitor the supplier performance. | Supplier Performance Evaluation Procedure and Evidences, KPI included to monitor supplier performance |
| | | | 5. Supplier evaluation process formally defined. Frequency of evaluation is followed. KPI developed to monitor the supplier performance + improvements on KPI can be demonstrated. | Supplier Performance Evaluation Procedure and Evidences, KPI included to monitor supplier performance, Improvement plan |
| 5.6 | What action do you take to develop your suppliers to prevent recurrence of non- conformities and | SUPPLIER PERFORMANCE IMPROVMENT | Suppliers NCs are handled informally Not Applicable (Comments explaining why it is not applicable is mandatory). | No formal System |
| | deviations? | | 2. NCs formally reported but Reactive approach, specific tasks follow up only on important suppliers/issues. | Evidences: Supplier Non-Conformance Handling Procedure, Action Evidence available for important issues |
| | Guide/Evidence examples: NC procedure, NC action plan implementation monitored, NC pareto chart, Process improvements & trend on repeat failures | | 3. Supplier NCR procedure in place. NCR management for each supplier can be demonstrated. | Evidences: Supplier Non-Conformance Handling Procedure, Non-Conformance Report and action summary |
| | | | 4. Supplier NCR procedure in place. NCR management for each supplier can be demonstrated. KPI used to evaluate the performance of the suppliers. Key NCs are addressed systematically | Evidences: Supplier Non-Conformance Handling Procedure, Non-Conformance Report and action summary. KPI evidence |



| | 5. Supplier NCR procedure and KPIs in place. Supplier development is a strategic function. Preventive approach is highly and deeply applied. Existing suppliers are continually developed, and new suppliers are integrated by specific processes/programs on a standardized base. | Evidences: Supplier Non-Conformance Handling Procedure, Non-Conformance Report and action summary. KPI evidence, Preventive actions and Improvement plan, Horizontal Deployment |
|--|--|--|
|--|--|--|

Classification: Restricted