

**DECLARATION**

The supplier must declare whether any associated company, business partner or relatives are bidding in this quotation exercise.

**Suppliers who make false declarations will be disqualified.**

**Please complete the section which is applicable.**

Section I

Event Reference and Description: \_\_\_\_\_

I declare that I have no associated company, business partner or relative taking part in the quotation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name & Designation

\_\_\_\_\_  
Company Stamp

Section II

I declare that the following person/company is also bidding in the quotation:

	<u>Name of Person/Company</u>	<u>Relationship to Supplier</u>
1	_____	_____
2	_____	_____
3	_____	_____

Please use new page if space is insufficient.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name & Designation

\_\_\_\_\_  
Company Stamp

**SINGAPORE AIRLINES**   
**SIA Commercial Supplies Department**

**Supplier's Profile (for evaluation)**

- Please
- a. Complete the following form in **BLOCK LETTERS** and return to Singapore Airlines Ltd, SIA Supplies Centre, 60 Loyang Way, Singapore 508751.
  - b. Do not leave any item blank. Print N.A. if information requested is not applicable.
  - c. Provide a copy of your company's most recent annual report or financial statement (Balance sheet, Profit & Loss Statement, Cashflow), and company brochure. Without which, SIA will not proceed to evaluate the company as one of SIA's potential vendors.
  - d. Attach any other supporting documents.

<b>Event Reference and Description:</b>		
<b>Company's Name</b>		
<b>Company's Address</b>	<b>Telephone No.</b>	
	<b>Facsimile No.</b>	
	<b>Email Address</b>	
	<b>Company's Website</b>	
<b>Company Registration No.</b>	<b>Registration Date:</b>	<b>Place of Registration:</b>
<b>Parent Company's Name (if any)</b>		<b>Parent Company's Address (if any)</b>
<b>Name(s) of Directors/Partners/Proprietor, please include title.</b>		
<b>Major Subsidiaries</b>		<b>Sole Agencies:</b>
<b>Company Type (Please Tick)</b> <input type="checkbox"/> Private <input type="checkbox"/> Public <input type="checkbox"/> Self-employed <input type="checkbox"/> Others (Please specify) – _____		<b>Business Type (Please Tick)</b> <input type="checkbox"/> Manufacturer <input type="checkbox"/> *Agent <input type="checkbox"/> *Licensee <input type="checkbox"/> *Trading House <input type="checkbox"/> Others (Please specify) – _____

<b>*If your company is a trading house/agent/licensee, please provide names of the principals.</b>					
<b>Product(s)</b>			<b>Principal(s)</b>		
<b>No. of Staff in Singapore</b>			<b>No. of Staff Worldwide</b>		
<b>Administrative</b>	<b>Production</b>	<b>Quality Control</b>	<b>Administrative</b>	<b>Production</b>	<b>Quality Control</b>
<b>List the types of products/services the company specializes in.</b>					
<p><b>Does the company design its own products?</b></p> <p><input type="checkbox"/> Yes                      <input type="checkbox"/> No</p> <p><b>Does the company manufacture its own products, OR is it contracted out?</b></p> <p><input type="checkbox"/> In house production                      <input type="checkbox"/> Contracted out</p>					
<b>If in house production, where is the company's production plant located?</b>			<b>If contracted out, which company(s) manufactures your products? Where is the production plant located?</b>		
<b>Address of Factory</b>			<b>Address of Factory</b>		
<b>What are the certifications your company/factory has achieved? For example: ISO9000, ISO9001, ISO 14000, ISO18000 etc.</b>					
<b>Will your company be able to provide item(s) industrial standard test certifications? For example: Edge-chipping test results, Thermal Shock test results etc.</b>					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Has the company worked with the SIA Group before?</b>					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>If YES, which company(s) in the SIA Group? Please detail the nature of the project.</b>					
<b>Company(s)</b>	<b>Projects(s)</b>			<b>Contract Period</b>	


**Does the company have experience working with any other airlines?**

Yes                       No

**If YES, please give an account of the experience.** (What does the company supply to the airline(s), which airline(s), how long is/was the partnership? Etc.)

Airline(s)	Project(s)	Period of Partnership

**Please provide us with 3 client references** (Preferably current clients, and include at least one airline if you have worked with them before)

Name of Client	Short Description of Projects (Include description of products supplied, total value of contract, and period of contract)	Address and Contact Info.
1.		
2.		
3.		

**Financial Information**

\*Please provide a copy of your company's most recent a) Annual report or audited financial statement (Balance sheet, Profit & Loss Statement, Cashflow),  
b) Company brochure

<b>Year</b>			
<b>Revenue for the 3 most current year-end periods (in SGD)</b>			
<b>Net Profit (in SGD)</b>			
	<b>Authorised Capital (in SGD)</b>	<b>Paid-up Capital (in SGD)</b>	<b>Issued Capital (in SGD)</b>
*Without the above information, SIA will not proceed to evaluate the company as one of SIA's potential vendors.			
<b>Name of Contact Person</b>			
<b>Designation</b>			
<b>Tel</b>			
<b>Facsimile</b>			
<b>Email Address</b>			
<b>Any other information</b>			
<b>Attachments:</b>			

I certify that the information given is true.

Signature: \_\_\_\_\_

Company Stamp: \_\_\_\_\_

Designation: \_\_\_\_\_

Date: \_\_\_\_\_