**The “Kumtor Operating Company” CJSC**

**Supplier Due Diligence Questionnaire**

The “Kumtor Operating Company” CJSC (KOC) does not tolerate any form of bribery or corruption. Answers to questions should be complete and honest. For potential counterparties, the completion of this questionnaire should in no way be construed as establishing a business relationship with the KOC.

**Instructions**

Answers must be submitted to all questions in the questionnaire, if the question is not applicable, indicate “not applicable.” The answers to some questions can be simply in the affirmative or negative (“Yes” or “No”) form. If you mark “Other” in the answer, please provide an explanation. In case the space provided for the answer is not enough, attach your answer on an additional page. If you have any questions about filling out the questionnaire, please contact the person who provided you with this questionnaire. Completion of this questionnaire is necessary due to the fact that KOC is considering entering into a business relationship with you or continuing the established business relationship. The information you provide and, where appropriate, obtained from third parties and other sources will only be used for the purpose of determining whether you or your organization meets the due diligence requirements of the KOC. In the event that a business relationship is established between KOC and you, if after filling out this questionnaire, circumstances arise that will affect or change the answers you previously provided, or may require clarification or additions to the answers to this questionnaire, you must inform your business contact at KOC. In the questionnaire, you/the organization on behalf of which you are authorized to provide information may be referred to as the Applicant. Depending on the applicability to the type of activity of the Applicant, the following documents must be attached to this questionnaire:

i. Constituent documents (charter) with all amendments and additions.

ii. Supporting document on the registration of the company (extract from the unified state

of the Register of Legal Entities, issued no more than one month before the date of submission,

certificate of state registration or re-registration).

iii. Document confirming the authority of the person to sign contracts (protocol, order,

power of attorney or another supporting document).

iv. Certificate of tax registration.

v. Certificate from the tax authorities on the absence of debts.

vi. passport, patent, social insurance policy (for individual entrepreneurs and where applicable for individuals).

VII. Copies of permits (licenses, permits) for types of activities.

1. Full name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Date of foundation and/or re-registration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Registration number / name and number of the license to carry out activities

4. Other Company Names or Previous Names Used to Conduct the Proposed Business

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Number of employees

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Is the applicant an individual entrepreneur □, works in a partnership/partnership □, a legal entity □, another □

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. List last names, first names, patronymics and the relevant forms and amounts of ownership/participation of the members of the Board of Directors, controlling shareholders, owners and major shareholders of the applicant company (including those owning a controlling stake), founders, other owners of the company, members of the board of directors, members of the executive body (members of the management board, directors, etc.), members of the supervisory/control body of the Supervisory Board, the Audit Commission, etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Have you or any of the persons mentioned in paragraph 7 above held a position in the Government, including in the civil service of the Kyrgyz Republic? This question also applies and applies to your close family members and close family members of all persons mentioned in paragraph 7 (husband, wife, brother, sister, children)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Did you or any of the persons referred to in paragraphs 7 and 8 have a business or employment relationship with the KOC (KOC employees, consultants, contractors, customers) or family ties with KOC officials, employees? If yes, please provide your full name and type of connection \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Are there any legal restrictions or potential conflicts of interest prohibiting or restricting the involvement of the Applicant as a supplier of goods, services, works for KOC? If yes, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Indicate the companies with which the Applicant has been cooperating at the present time and for the previous five years, as well as describe the list of goods/services that the Applicant has provided.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 |
| Name of the Customer |  |  |  |  |
| Customer contact person |  |  |  |  |
| Contact Number |  |  |  |  |
| Website |  |  |  |  |
| El. Address |  |  |  |  |
| Description  works /services/  Goods |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 12. Safety | | Yes | No |
| a | Does the Applicant have a specific health and safety (HSE) program, including an HSE training program for employees? |  |  |
| b | Does the Applicant keep health and safety records? |  |  |
| c | Does the Applicant conduct regular meetings and inspections as part of the HSE activities? |  |  |
| d | Does the Applicant have trained and certified personnel for first aid and HSE? |  |  |
| e | Does the applicant conduct a medical examination for his employees? |  |  |
| f | Does the Applicant have a no-drug and alcohol policy for employees? |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 13. Code of Ethics and Business Conduct | | Yes | No |
| g | The Applicant has read, acknowledges and agrees to the principles contained in the Supplier Code of Conduct, the KOC Code of Ethics, the International Business Policy as set forth on the www.kumtor.kg website and applicable to KOC employees and contractors/suppliers, and declares compliance with these terms and conditions. |  |  |
| e | Has the Applicant or any of its employees, directors, officers, major owners or shareholders been charged with a breach of international or local anti-corruption laws, or has it been the subject of any corruption or criminal investigation within a jurisdiction with any offence, including bribery, conflict of interest, corruption, kickbacks or money laundering? |  |  |
| h | Has the Applicant ever paid money or given anything of value to a government official to maintain business or gain an undue advantage in any jurisdiction? “Public official” means (i) any officer or employee representing or acting on behalf of any public authority, ministry, agency, body (including municipalities, corporations, or similar entities owned or controlled or acting in the interest of the State); or (ii) any official, employee, or person representing or acting on behalf of a political party? |  |  |
| i | Does the Applicant have established procedures for reporting any misconduct? Does the Applicant have a Code of Ethical Conduct? |  |  |
| j | Is the Applicant familiar with the prohibitions provided for by the legislation on corruption? |  |  |
| k | Does the Applicant have an anti-corruption policy? |  |  |
| l | Does the Applicant have procedures in place to monitor the effectiveness of its anti-corruption policy? |  |  |
| m | Does the Applicant provide training to its employees on anti-bribery laws? |  |  |
| o | Is the Applicant free from any debts, debts, and obligations, including state, including tax and social? |  |  |
| p | Is the Applicant, directly or indirectly, or any of your affiliates or any of their respective directors, officers, employees, agents or representatives, currently subject to any sanctions imposed by the government (or any authority) of the Kyrgyz Republic, Canada, the United States, the EU, the United Nations Security Council, or any other relevant authorities? |  |  |
| q | Is the Applicant in the process of bankruptcy or liquidation? |  |  |
| r | Does the Applicant have unfulfilled or overdue obligations because of the results of the involving the Applicant in the performance of work, the supply of goods or the provision of services based on the results of tenders announced with the participation of state Customers. |  |  |

14. The name, address, and telephone numbers of the KOC representative who, on behalf of the KOC, proposes you or your organization to be engaged as a supplier of goods, services or works.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

15.The person whose signature appears below is authorized to certify, on behalf of the Applicant, that the information set out in this Due Diligence Questionnaire is true, correct, and complete. The applicant agrees to notify the KOC immediately of any changes to the information provided in this questionnaire and the documents you attach to the questionnaire.