|  |  |  |
| --- | --- | --- |
| **Non Asbestos Supplier Quality Form** | ***For Metizoft****:* | |
| *Yards’ supplier no::* | 11-11 |
| **(NAQ)** | *Internal no.* | QT |
|  | *SFI:* | 11-11 |

1. **GENERAL SUPPLIER INFORMATION:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Company name: |  | | | Org. No./or similar |  |
| Address: |  | | | | |
| Post code: |  | City |  | | |
| Country: |  | Web page.: |  | | |
| Telephone no: |  | Email.: |  | | |

1. **HSE SYSTEM:**

|  |  |  |  |
| --- | --- | --- | --- |
| 2.1 | Has the company implemented a formal system to ensure the health, safety and environment (HSE) as minimum meets national (in the country where the company is addressing) laws and regulations relating to safety? ( Yes / No ) | |  |
| 2.2 | If yes, please add type system or name |  | |

1. **EXTERNAL STANDARDS:**

|  |  |  |  |
| --- | --- | --- | --- |
| 3.1 | Is the company qualified according to ISO standards? (Yes / No) (For example, ISO 9001, 14001, 18001, 30000 or other standards)? | |  |
| 3.2 | If yes, please provide the certificate number: |  | |
| 3.3 | Other relevant additional information: |  | |

1. **INVENTORY OF HAZARDOUS MATERIALS:**

|  |  |  |  |
| --- | --- | --- | --- |
| 4.1 | Has the company knowledge about Inventory of Hazardous Materials Regulations (Ref.: MEPC 269(68) And EU SRR (Yes/No)? | |  |
| 4.2 | If yes, please provide the internal reference number: |  | |
| 4.3 | Other relevant information: |  | |

1. **ASBESTOS FREE PRODUCTS:**

|  |  |  |  |
| --- | --- | --- | --- |
| 5.1 | Is the company familiar with regulation MSC.1/Circ.1379, SOLAS Reg. II-/3-5 and IACS SC 249? (Yes/No) | |  |
| 5.2 | Has the company informed its sub-suppliers of the requirements that have been prevailing through regulations MSC.1/Circ.1379, SOLAS Reg. II-/3-5 and IACS SC 249? (Yes/No) | |  |
| 5.3 | If yes, please provide the internal reference number: |  | |
| 5.4 | Other relevant information: |  | |
| 5.5 | Are all of the products delivered by the company 100 % asbestos free (Yes/No) | |  |
| 5.6 | Other relevant information: |  | |

1. **SIGNATURE:**

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Place: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Authorized Signatory: |  | Position: |  |
| Signature/Stamp: |  | | |

**Non Asbestos Supplier Quality Form**

1. **General**

According to rules & regulation MSC.1/Circ.1379, SOLAS Reg. II-/3-5 and IACS SC 249 the yard will need to have an 100% Non-Asbestos Supplier List available for inspection by Class. The yard will need to maintain and update this list.

1. **Purpose**

The “Non Asbestos Supplier Quality Form” is a tool to verify that supplier fulfills the requirements according to MSC.1/Circ.1379, SOLAS Reg. II-/3-5 and IACS SC 249 and at the same time make the suppliers aware of their responsibility.

1. **Scope**

Collect commercial and technical information from supplier to enable a sufficient evaluation.

1. **Description**

The yard will obtain necessary information from the list to make a rough evaluation to determine whether the supplier has the potential to gain approved status. To be an approved supplier will it be an absolute demand that all products are 100% asbestos free.