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|  | <b>CORPORATE QUALITY ASSURANCE</b><br><b>MAIN CONTRACTOR EVALUATION REPORT</b> |  |  |  |  |
|                                                                                  |                                                                                |  |  |  |  |

|                                                                                                                                                                 |                                                                                                                                                                                                                                                                              |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------|
| i.                                                                                                                                                              | Main Contractor                                                                                                                                                                                                                                                              |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| ii.                                                                                                                                                             | Project                                                                                                                                                                                                                                                                      |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| iii.                                                                                                                                                            | Package Name                                                                                                                                                                                                                                                                 |                                                                                                | Package No                                                                                     |                                                         |                                                                                     |                   |
| iv.                                                                                                                                                             | Proposed Item/Scope of Sub-contracting                                                                                                                                                                                                                                       |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| v.                                                                                                                                                              | Item covered under                                                                                                                                                                                                                                                           | Schedule-1                                                                                     |                                                                                                | As per contract clause No-                              |                                                                                     |                   |
|                                                                                                                                                                 |                                                                                                                                                                                                                                                                              | Schedule-2                                                                                     |                                                                                                |                                                         |                                                                                     |                   |
| vi.                                                                                                                                                             | If item is Schedule-1 and proposed sub-vendor is indigenous, Main Contractor to explain how the contractual provisions will be fulfilled-                                                                                                                                    |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| vii.                                                                                                                                                            | Name and Address of the proposed Sub-vendor's works                                                                                                                                                                                                                          |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| viii.                                                                                                                                                           | PO placement date/ Start of manufacturing (if self-manufactured) as per L2 network                                                                                                                                                                                           |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| ix.                                                                                                                                                             | Item Description<br>(Type/Size/Rating/Scope of Sub-Contracting)                                                                                                                                                                                                              | Total quantity of proposed item envisaged in this package (Nos/ Running Meters/ Kgs/ Tons etc) | Quantity proposed to be procured from proposed sub-vendor (Nos/ Running Meters /Kgs /Tons etc) | Per month quantity requirements as per project schedule | Actual monthly production capacity viz-a-viz the monthly proposed order requirement |                   |
|                                                                                                                                                                 |                                                                                                                                                                                                                                                                              |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| x.                                                                                                                                                              | Supply experience of the proposed sub-vendor (including supplies to Main Contractor, if any) for similar item/scope of sub-contracting, for last 3 years ( <i>Note:- Only relevant experience details wrt proposed item/scope of subcontracting to be brought out here</i> ) |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
|                                                                                                                                                                 | Project/Package                                                                                                                                                                                                                                                              | Customer Name                                                                                  | Supplied Item<br>(Type/Rating/Model /Capacity/Size etc)                                        | PO ref<br>no/date                                       | Supplied<br>Quantity                                                                | Date of<br>Supply |
|                                                                                                                                                                 |                                                                                                                                                                                                                                                                              |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| We confirm that as per our assessment, the proposed sub-vendor has requisite capabilities and supply experience for the proposed item/scope of sub-contracting. |                                                                                                                                                                                                                                                                              |                                                                                                |                                                                                                |                                                         |                                                                                     |                   |
| Name:                                                                                                                                                           |                                                                                                                                                                                                                                                                              | Desig:                                                                                         |                                                                                                | Sign:                                                   |                                                                                     | Date:             |

Company's Seal/Stamp:-

Format No. : QS-01-QAI-P-04/F1-R3

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|  | <b>CORPORATE QUALITY ASSURANCE</b><br><b>SUB-VENDOR QUESTIONNAIRE</b> |
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|             |                                                                                                                                                                                   |                                                                                                                                                                  |  |  |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| <b>i.</b>   | <b>Item/Scope of Sub-contracting</b>                                                                                                                                              |                                                                                                                                                                  |  |  |
| <b>ii.</b>  | <b>Address of the registered office</b>                                                                                                                                           | <b>Details of Contact Person</b><br>(Name, Designation, Mobile, Email)                                                                                           |  |  |
| <b>iii.</b> | <b>Name and Address of the proposed Sub-vendor's works where item is being manufactured</b>                                                                                       | <b>Details of Contact Person:</b><br>(Name, Designation, Mobile, Email)                                                                                          |  |  |
| <b>iv.</b>  | <b>Annual Production Capacity for proposed item/scope of sub-contracting</b>                                                                                                      |                                                                                                                                                                  |  |  |
| <b>v.</b>   | <b>Annual production for last 3 years for proposed item/scope of sub-contracting</b>                                                                                              |                                                                                                                                                                  |  |  |
| <b>vi.</b>  | <b>Details of proposed works</b>                                                                                                                                                  |                                                                                                                                                                  |  |  |
| 1.          | <b>Year of establishment of present works</b>                                                                                                                                     |                                                                                                                                                                  |  |  |
| 2.          | <b>Year of commencement of manufacturing at above works</b>                                                                                                                       |                                                                                                                                                                  |  |  |
| 3.          | <b>Details of change in Works address in past (if any)</b>                                                                                                                        |                                                                                                                                                                  |  |  |
| 4.          | <b>Total Area</b>                                                                                                                                                                 |                                                                                                                                                                  |  |  |
|             | <b>Covered Area</b>                                                                                                                                                               |                                                                                                                                                                  |  |  |
| 5.          | <b>Factory Registration Certificate</b>                                                                                                                                           | <b>Details attached at Annexure – F2.1</b>                                                                                                                       |  |  |
| 6.          | <b>Design/ Research &amp; development set-up</b><br>(No. of manpower, their qualification, machines & tools employed etc.)                                                        | <b>Applicable / Not applicable if manufacturing is as per Main Contractor/purchaser design)</b><br><b>Details attached at Annexure – F2.2</b><br>(if applicable) |  |  |
| 7.          | <b>Overall organization Chart with Manpower Details</b><br>(Design/Manufacturing/Quality etc)                                                                                     | <b>Details attached at Annexure – F2.3</b>                                                                                                                       |  |  |
| 8.          | <b>After sales service set up in India, in case of foreign sub-vendor</b><br>(Location, Contact Person, Contact details etc.)                                                     | <b>Applicable / Not applicable</b><br><br><b>Details attached at Annexure – F2.4</b>                                                                             |  |  |
| 9.          | <b>Manufacturing process execution plan with flow chart indicating various stages of manufacturing from raw material to finished product including outsourced process, if any</b> | <b>Details attached at Annexure – F2.5</b>                                                                                                                       |  |  |

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|  | <b>CORPORATE QUALITY ASSURANCE</b><br><b>SUB-VENDOR QUESTIONNAIRE</b> |
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| 10.                                                                                                                                                                                                                                                                                                                                  | Quality Control exercised during receipt of raw material/BOI, in-process , Final Testing, packing                                                                                                                                                                                                                                                                                                                                                                      | Details attached at Annexure – F2.6                                                        |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------|----------------|-------------------|----------------|--|-------|--|--|--|--|--|
| 11.                                                                                                                                                                                                                                                                                                                                  | Manufacturing facilities<br>(List of machines, special process facilities, material handling etc.)                                                                                                                                                                                                                                                                                                                                                                     | Details attached at Annexure – F2.7                                                        |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 12.                                                                                                                                                                                                                                                                                                                                  | Testing facilities<br>(List of testing equipment)                                                                                                                                                                                                                                                                                                                                                                                                                      | Details attached at Annexure – F2.8                                                        |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 13.                                                                                                                                                                                                                                                                                                                                  | If manufacturing process involves fabrication then-                                                                                                                                                                                                                                                                                                                                                                                                                    | Applicable / Not applicable                                                                |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                      | List of qualified Welders                                                                                                                                                                                                                                                                                                                                                                                                                                              | Details attached at Annexure – F2.9                                                        |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                      | List of qualified NDT personnel with area of specialization                                                                                                                                                                                                                                                                                                                                                                                                            | (if applicable)                                                                            |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 14.                                                                                                                                                                                                                                                                                                                                  | List of out-sourced manufacturing processes with Sub-Vendors' names & addresses                                                                                                                                                                                                                                                                                                                                                                                        | Applicable / Not applicable<br><br>Details attached at Annexure. –F2.10<br>(if applicable) |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 15.                                                                                                                                                                                                                                                                                                                                  | Supply reference list including recent supplies                                                                                                                                                                                                                                                                                                                                                                                                                        | Details attached at Annexure – F2.11<br>(as per format given below)                        |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                      | <table border="1" style="width: 100%;"> <tr> <th style="width: 10%;">Project/<br/>package</th> <th style="width: 10%;">Customer<br/>Name</th> <th style="width: 30%;">Supplied Item (Type/Rating/Model<br/>/Capacity/Size etc)</th> <th style="width: 15%;">PO ref no/date</th> <th style="width: 15%;">Supplied Quantity</th> <th style="width: 10%;">Date of Supply</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> | Project/<br>package                                                                        | Customer<br>Name | Supplied Item (Type/Rating/Model<br>/Capacity/Size etc) | PO ref no/date | Supplied Quantity | Date of Supply |  |       |  |  |  |  |  |
| Project/<br>package                                                                                                                                                                                                                                                                                                                  | Customer<br>Name                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Supplied Item (Type/Rating/Model<br>/Capacity/Size etc)                                    | PO ref no/date   | Supplied Quantity                                       | Date of Supply |                   |                |  |       |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                            |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 16.                                                                                                                                                                                                                                                                                                                                  | Product satisfactory performance feedback<br>letter/certificates/End User Feedback                                                                                                                                                                                                                                                                                                                                                                                     | Attached at annexure - F2.12                                                               |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 17.                                                                                                                                                                                                                                                                                                                                  | Summary of Type Test Report (Type Test Details, Report No, Agency, Date of testing) for the proposed product<br>(similar or higher rating)<br>Note:- Reports need not to be submitted                                                                                                                                                                                                                                                                                  | Applicable / Not applicable<br><br>Details attached at Annexure – F2.13<br>(if applicable) |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 18.                                                                                                                                                                                                                                                                                                                                  | Statutory / mandatory certification for the proposed product                                                                                                                                                                                                                                                                                                                                                                                                           | Applicable / Not applicable<br><br>Details attached at Annexure – F2.14<br>(if applicable) |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 19.                                                                                                                                                                                                                                                                                                                                  | Copy of ISO 9001 certificate<br>(if available)                                                                                                                                                                                                                                                                                                                                                                                                                         | Attached at Annexure – F2.15                                                               |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| 20.                                                                                                                                                                                                                                                                                                                                  | Product technical catalogues for proposed item (if available)                                                                                                                                                                                                                                                                                                                                                                                                          | Details attached at Annexure – F2.16                                                       |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                            |                  |                                                         |                |                   |                |  |       |  |  |  |  |  |
| <table border="1" style="width: 100%;"> <tr> <td style="width: 15%;">Name:</td> <td style="width: 30%;"> </td> <td style="width: 10%;">Desig:</td> <td style="width: 20%;"> </td> <td style="width: 10%;">Sign:</td> <td style="width: 15%;"> </td> <td style="width: 10%;">Date:</td> <td style="width: 10%;"> </td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                            | Name:            |                                                         | Desig:         |                   | Sign:          |  | Date: |  |  |  |  |  |
| Name:                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Desig:                                                                                     |                  | Sign:                                                   |                | Date:             |                |  |       |  |  |  |  |  |

Company's Seal/Stamp:-