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| **HSE DEPARTMENT** | | | | | JOB NO. | | DOCUMENT NO. | | REV. |
| **PT POLYTAMA PROPINDO** | | | | |  | | PPPB/HSE/QUE/2022-0108 | | 00 |
|  | | | | | SHEET 1 of 13 | | | | |
| **QUESTIONNAIRE OF HSE CONTRACTOR QUALIFICATION** | | | | | | | | | |
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| DUAL FEED COMPETITION (DFC) AND ENGINEERING-PROCUREMENT-CONSTRUCTION WORK (EPC WORK) | | | | | | | | | |
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| FOR  POLYPROPYLENE PLANT BALONGAN (PPB) PROJECT  **2022** | | | | | | | | | |
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**QUESTIONNAIRE OF HSE CONTRACTOR QUALIFICATION**

# QUESTIONNAIRE OF HSE CONTRACTOR QUALIFICATION

Questionnaire of HSE Contractor Qualification contains questions regarding implementation of HSE System of contractor’s company being the Bidder. The Contractor shall fill in the questionnaire as given by the Bidder, and provide evidence supporting the answer of questionnaire according to instruction existing in the questionnaire (*in reference to Section 4 Form of Questionnaire of HSE Contractor Qualification*). The evidence can be in terms of photo, record, or other supporting documents. The evidences shall be prepared systematically in the bundle of documents (hardcopy) or in the form of softcopy, according to stipulation in the Instruction to Bid (ITB) Document.

# PROJECT INFORMATION

The CONSULTANT shall be required to carry out the project consultant work with the scope, but without limitation to:

FEED Design:

1. Preparation
2. Mobilization and demobilization
3. Topography survey
4. Data analysis
5. Engineering study
6. Site plant layout
7. Detail engineering design
8. Handover document

Engineering, Procurement, and Construction:

1. Preparation
2. Mobilization and demobilization (Manpower and Equipment)
3. Procurement (Equipment and Material)
4. Civil and structure construction
5. Mechanical installation
6. Piping construction
7. Electrical and instrument construction
8. Jetty construction
9. Pre-Commissioning and Commissioning
10. Start Up
11. Handover

# WORK RISK LEVEL

Based on scope of work and identification result of risk existing at this work, then the level of risk for this work shall be “HIGH RISK”, each participating contractor shall at lease have category of “HIGH RISK” or obtaining minimum value of this questionnaire shall be 60%.

**4. QUESTIONNAIRE FORM OF HSE CONTRACTOR QUALIFICATION**

**General Information**

|  |  |  |
| --- | --- | --- |
| * Company Name | : | |
| * Address | : | |
| * Telephone | : | |
| * Fax | : | |
| * Email | : | |
| * Core Business of the Company | : | |
| * Year of Incorporation | : | |
| * Contact Person | : | |
| * 1. Position   2. Telephone   3. Fax   4. Email | :  :  :  : | |
| SECTION 1 – LEADERSHIP AND COMMITMENT | | |
| * 1. **Commitment of Health, Safety and Environmental (HSE) through Leadership** | | |
| 1. How are senior managers are involved personally in the HSE management, as an example in determining the target (*objective*) and its supervision? | | |
| 1. Please give evidence of commitment at all levels of organization | | |
| 1. How do you promote positive culture to the problems of HSE? | | |
| *Remarks / Evidence in terms of among others:*   * *Senior management shall be the highest management in the company* * *Evidence of involvement of senior management in HSE Affairs (senior management signs the Policy on HSE,* safety messages *(HSE campaign, HSE Rewards), for example the field visit program of senior management and its supporting evidence (attendance list, trip plan, report, phone, etc.), corrective action taken by management, performance evaluation HSE)* * *Structure of HSE committee involving the line department, meeting schedule and inspection of HSE committee, Program and procedure of HSE involving the line department, attendance list of HSE meeting attended by all managements* | | |
| SECTION 2 – POLICY AND STRATEGIC TARGET OF HSE | | |
| **2.1. HSE Policy Document** | | |
| 1. Does your company have HSE policy document, in the language which is understandable by workers? Yes / No   If Yes, please enclose. | | |
| 1. Who will bear the entire responsibilities and final responsibility of HSE in your organization? | | |
| 1. Who is the most senior person in the organization who will be responsible for the current policy in the area of authority and location where the workers is working? Give name and position. | | |
| 1. Please explain in detail the methods that you use to make the workers understand and adhere to the HSE policy statement? | | |
| 1. What arrangement that you have to notify the workers regarding any change of policy? | | |
| *Remarks / evidence in terms of among others:*   * *Availability of HSE policy with complete content, there is Indonesian language version signed by the highest management* * *Evidence of socialization (attendance list of socialization, HSE policy is placed in the work premise, distribution list, bulletin board, e-mail, announcement letter)* * *HSE Policy shall be the part of HSE induction* | | |
| **2.2. Strategic Target of HSE Periodically (Yearly)** | | |
| 1. Does your company have HSE strategic target? Yes / No   If Yes, please enclose the evidence. | | |
| 1. Please explain in detail the method that you use to make the workers understand about the HSE strategic target? | | |
| *Remarks/evidence in terms of among others:*   * *There is periodic HSE strategic target* * *Please enclose the Objectives, Target, and Program of HSE (OTP)* * *Please enclose MoM and attendance list of OTP discussion meeting* | | |
| SECTION 3 – ORGANIZATION, RESPONSIBILITY, RESOURCES, STANDARD, AND DOCUMENTATION | | |
| **3.1. Organization Structure for HSE Management** | | |
| 1. How is your company structure made to manage and communicate the HSE effectively? | | |
| 1. Do the HSE meetings promote the comprehension about HSE? | | |
| 1. Do client and contractor meet regularly to discuss and follow up the situation of ‘*interface*’? | | |
| 1. What conditions that has been made by your company for the communication meetings of HSE? Please enclose the organization structure. | | |
| *Remarks / evidence in terms of among others:*   * *HSE Organization* * *Description of tasks and responsibilities* * *List of personnel and qualification of HSE* * *Attendance list of HSE meetings of all levels of organization* * *Minutes of Meeting (MoM) and materials of meeting presentation of HSE* | | |
| **3.2. Training of HSE for the Managers, Supervisor and Holder of Important Position of HSE** | | |
| 1. Have the managers and supervisors at all levels who wants to plan, monitor, estimate and perform the work received the formal training of HSE according to their responsibilities in relation to the implementation of work according to requirements of HSE? Yes they have/ No They haven’t   If they have, please give the detail. | | |
| 1. If the training is given in-house, please explain the material and duration of courses. Including related refreshing training for the existing manager and supervisor.   Give example of training matrix. | | |
| 1. How do you identify the operation areas of your company that require special training, for example the training related to health damage such as radiation, asbestos and chemical substances? | | |
| 1. What HSE specialist resources owned by your organization? | | |
| 1. How does your company provide specialty training to the HSE staffs? | | |
| *Remarks / evidence in terms of among others:*   * *Training program and training matrix for all staffs (all positions until supervisor and management level) according to their tasks and responsibilities (including specialized training)* * *Notes / documents of the evidence of training program implementation (attendance list, photo, training materials)* * *Notes of training (training record) for all staffs* | | |
| **3.3. General HSE Training (to all workers and related party)** | | |
| 1. What arrangement does your company have made to ensure that the new workers have knowledge about the basic HSE in industry, and to maintain that the said knowledge is always *up to date*? | | |
| 1. What arrangement has your company made to ensure that the workers, including sub-contractor, also understand about the policy, procedure, and requirements of your HSE? | | |
| 1. What arrangement has your company made to ensure that the new workers and workers of sub-contractor are already instructed and receiving information regarding specific danger that arises from the nature of work? | | |
| Notes for (a), (b) & (c): if training is given *in-house,* give detail of training content. | | |
| *Remarks / evidence in terms of among others:*   * *General training program of HSE for new workers, existing workers, contractor, and visitor* * *Document / handbook of HSE as given to the workers* * *Material (material of presentation, hand out, etc.) and attendance list of HSE induction* * *Written procedure or policy regarding induction / orientation of HSE for new workers* * *Evidence of Follow up (follow-up) from the work observation of new workers (test findings, questionnaire, etc..)* | | |
| **3.4. Fulfillment of HSE Competency** | | |
| 1. Does your company have competency system? Yes / No   If Yes, please explain the scope and content of the competency system. | | |
| 1. What arrangement has your company made to ensure that the knowledge of HSE of the existing workers are always *up to date*? If the training is made *in-house* give detail of training materials. | | |
| *Remarks / evidence in terms of among others:*   * *Competency system of HSE (procedure, database) for individual* * *Implementation evidence* * *Materials of presentation* * *Data update evidence* | | |
| **3.5. HSE Management of Contractor (Business Partner)** | | |
| 1. Does your company have system or process of contractor management? Yes / No   If Yes, please give explanation from the process or system. | | |
| 1. How do you evaluate the HSE competency, or HSE performance of contractor? | | |
| 1. Where do you explain about the standard that you demand for fulfillment by your contractor? | | |
| 1. How do you ensure the following standards have been fulfilled and checked? | | |
| Please mention the names of your main contractor at this time, if any. | | |
| *Remarks / evidence in terms of among others:*   * *System/Procedure of contractor Management* * *Contractor selection criteria* * *Implementation evidence (pre-qualification, performance monitoring, mutual inspection, contractor audit)* * *For example key performance indicator of HSE* | | |
| **3.6. Regulation and Standard of HSE** | | |
| 1. How do you known the industrial standards and new regulations of HSE which may be applicable for your activity? | | |
| 1. What is the complete structure to make, renew, and disseminate the standard of HSE? | | |
| 1. Do you have HSE Standard? Does your Company standard conform to OGP / industrial guidance, or the recommended practices?   Please explain! | | |
| *Remarks/evidence in terms of among others:*   * *Evidence of list of legislation of HSE and any other standard which is used together with its references (evidence of standard is already inclusive of all dangerous activities – Local regulation and standard, global industry)* * Evidence of standard updating system *(for example in the form of procedure)* | | |
| SECTION 4 – RISK MANAGEMENT | | |
| **4.1. Risk Evaluation and Control** | | |
| 1. How does your Company identify any danger, evaluate risk, control and mitigate the impact, to the level which is practically acceptable (ALARP - *as low as* *reasonably practicable).* | | |
| *Remarks / evidence in terms of among others :*   * *Procedure for risk management covering the risk evaluation and its control* * *Procedure for Hazard Identification Risk Assessment and Determining Control (HIRADC), Task Risk Assessment (TRA), Job Safety Analysis (JSA)* * *Evidence of implementation JSA/TRA/JHA, HAZID, HAZOP, HIRADC, QRA* * *Registration of HSE risk and action plan* | | |
| **4.2. Danger to Occupational Health** | | |
| 1. Do you have special policy and program regarding health dangers specifically such as misuse of drugs, blood borne pathogens, malaria, and others? | | |
| 1. What health dangers (chemical, vibration, noise, radiation, etc.) in relation to your scope of work?   Please explain how the health dangers are identified, evaluated and controlled. | | |
| 1. What systems are available to control the dangers and monitor the effectiveness of its control? Has the exposure monitoring of workers made regularly become the part of the system? | | |
| *Remarks / evidence in terms of among others:*   * *Health policy* * *Health risk assessment* * *Procedure / program of health risk management (hearing conservation program, dangerous chemical substance management program, industrial hygiene monitoring, fitness for work, banned drugs & alcohol, health surveillance, etc.)* * *Health danger communication program in the work premise (orientation, e-mail, notice board, safety sign, MSDS, etc.)* * *Supporting data as the evidence of program implementation (danger monitoring result/report, random check, etc.)* | | |
| **4.3. Danger to Occupational Safety** | | |
| 1. What safety dangers *(mechanical guarding,* working at height, lifting and tackle, confined space entry, explosive atmosphere, etc.) related to your scope of work? | | |
| 1. What system are available to control the said dangers and monitor the effectiveness of its control? | | |
| *Remarks / evidence in terms of among others:*   * *Safety risk assessment* * *Procedure / program of safety risk management (safe lifting procedure, working at height, confined space entry, energy isolation, permit to work, journey management, etc.)* * *Supporting data as a evidence of program implementation (checklist, PTW, etc.)* | | |
| **4.4. Logistic Activity Danger** | | |
| 1. What logistic danger (land, air, sea transportation, material handling, etc.) related to your scope of work? | | |
| 1. What systems are available to control over the said dangers and monitor the effectiveness of its control? | | |
| *Remarks / evidence in terms of among others:*   * *Logistic risk assessment* * *Procedure / program of risk management related to the logistic* (safe lifting procedure*,* journey management*,* pre-use vehicle inspection*,* chemical storage and handling*,* etc*.)* * *Supporting data as evidence of program implementation (*vehicle pre-use checklist, BALOK, MSDS, load test report*,* etc. | | |
| **4.5. Danger to Environment** | | |
| 1. What environmental dangers (spilled / spill of chemical substance, air emission, waste disposal, etc.) related to your scope of work? | | |
| 1. What systems are available to control the said dangers and monitor the effectiveness of its control? | | |
| *Remarks / evidence in terms of among others:*   * *Environmental risk assessment* * *Procedure / program of environmental risk management (environmental management, waste disposal, spill handling, environmental audit, etc.)* * *Data as evidence of program implementation (waste identification/classification, waste manifest, waste separation photo, cooperation agreement on waste disposal, etc.)* | | |
| **4.6. Danger to Security** | | |
| 1. What security dangers (terrorism, kidnapping, robbery, hostile of location population, etc..) related to your scope of work? | | |
| 1. What systems are available to control the said dangers and monitor the effectiveness of its control? | | |
| *Remarks / evidence in terms of among others:*   * *Security risk assessment* * *Procedure / program of security risk management such as terrorism, kidnapping, robbery,* hostileof local population*, etc.* * *Supporting data as the evidence of program implementation (training materials, organization chart of security, evidence of security drill, etc.)* | | |
| ***4.7. Danger to Social Aspect*** | | |
| 1. What social dangers that are related to our scope of work? | | |
| 1. What system are available to control the said dangers and monitor the effectiveness of its control? | | |
| *Remarks/evidence in terms of among others:*   * *Risk Assessment on social responsibilities* * *Procedure program of social responsibility risk management* * *Data-data support as evidence of program implementation (evidence of CSR program etc..)* | | |
| **4.8. Personal Protective Device** | | |
| 1. What arrangement does your company have for the procurement and provision of personal protective device and work uniform, either standard or needed for special activities? | | |
| 1. Do you provide Personal Protective Device (APD) suitable for your worker? Please give list of APD (Personal Protective Device) for this scope of work. | | |
| 1. Do you give training regarding the way how to use APD (Personal Protective Device)?   Please explain the training material and any of its follow up. | | |
| 1. Do you have any program to ensure that the APD (Personal Protective Device) is used and maintained? | | |
| *Remarks/evidence in terms of among others:*   * *Procedure of APD (Personal Protective Device)* * *Matrix of APD (Personal Protective Device) based on work and work location* * *List of APD (Personal Protective Device) and its specification (according to company standard)* * *Notes of inspection of APD (Personal Protective Device)* * *Material and attendance list of training of APD (Personal Protective Device)* * *Inventory / stock of APD (Personal Protective Device)* * *Evidence of distribution of APD (Personal Protective Device)* | | |
| SECTION 5 – PLANNING AND PROCEDURE | | |
| **5.1. Operation Manual of HSE** | | |
| 1. Do you have manual of HSE of company or operation manual which is suitable with the rules of HSE which are explained in detail in the work procedure of HSE and rules of safety which is ratified by the company as relating to scaffolding, lifting equipment, heavy equipment, pressurized vessel or excavation? Yes / No   If Yes, please enclose the copy of the supporting document | | |
| 1. How do you ensure that the working procedure and procedure in use by the workers in field consistent with the purpose and arrangement of your HSE policy? | | |
| *Remarks / evidence in terms of among others:*   * *HSE Manual (enclose table of content of HSE manual)* * *Procedure of HSE (enclose the list of procedure and work instruction)* * *Risk assessment result of HSE* * *Procedure revision schedule and/or document control procedure (update system and document dissemination)* * *Supporting evidence concerning follow up on effectiveness and feedback for improvement (report on research of SMHSE and evidence of improvement based on feedback)* | | |
| **5.2. Reliability of Infrastructure and Equipment** | | |
| 1. How do you ensure that the infrastructure, production station (*plant*) and equipment which is used (in your working area, client location, or in the other location) certified, registered, controlled, and maintained appropriately and in good working condition? | | |
| *Remarks/evidence in terms of among others:*   * *Written procedure/program regarding certification, inspection, and maintenance (preventive and corrective) of infrastructure and equipment* * *List of infrastructure and certified equipment* * *Maintenance program schedule (preventive and corrective)* * *Inspection program: scope, frequency, team, result and follow up* * *Evidence of inspection / certification from third party* * *Supporting evidence of implementation of procedure / program (inspection record, etc.)* | | |
| **5.3. Change Management** | | |
| 1. How do you manage change and evaluate the related risk such as personnel, equipment, process, documentation? | | |
| *Remarks / evidence in terms of among others:*   * *Change management procedure* * *Evidence of implementation in various activities* * *Evidence of follow up of effectiveness* * *Notes of change management forms* | | |
| **5.4. Contingency Plan** | | |
| 1. What arrangement does your company have for the contingency plan? | | |
| 1. What emergency situation does it cover? | | |
| *Remarks / evidence in terms of among others:*   * *Contingency Plan/Procedure* * *Contingency organization structure* * *Drill program* * *schedule, frequency, scenario, evaluation findings and follow up* * *Training for contingency team* * *List of contingency equipment and its maintenance program* * *List of support / cooperation of third party if any* | | |
| SECTION 6 – IMPLEMENTATION AND MONITORING OF HSE PERFORMANCE | | |
| **6.1. Implementation of HSE Management System and Monitoring of Performance Effectively** | | |
| 1. What arrangement does your company have for supervision and monitoring of HSE Performance? | | |
| 1. How does you company ensure the implementation of working procedures in working location, for example adherence to procedure, *toolbox talks*, meeting of HSE, supervision, work observation? | | |
| 1. How do you monitor the HSE performance of workers, for example the danger identification system, HSE Participation? | | |
| 1. What active HSE monitoring has it made, for example upon non-occurrence of incident? | | |
| 1. How do you report and improve the weakness which is already identified? | | |
| 1. How do you communicate the results of active performance monitoring to the relevant personnel? | | |
| *Remarks / evidence in terms of among others:*   * *System / procedure for HSE performance monitoring* * *Accident reporting procedure* * *HSE performance report which is communicated to the management and all workers* * *Statistic and analysis on incident as well as analysis of other HSE performance indicator* * *Reward program for good HSE performance* | | |
| **6.2. HSE Performance Indicator (Performance Record)** | | |
| 1. Please give record regarding statistic incident every year for the last 5 years, regarding: | | |
| * Total Fatality cases | | |
| * Total Lost Work Case (LWC) | | |
| * Total days lost due to accident | | |
| * Total Restricted Work Day (RWC) cases | | |
| * Total medical treatment cases (MTC) | | |
| * Total P3K case (FAC) | | |
| * Total near miss accident | | |
| * Fatal Accident Rate (per 100 million worked) | | |
| * Lost Time Injury Frequency (per million worked) | | |
| * Total Recordable Incident Rate (per million hours worked) | | |
| * Specific other HSE Performance Indicator according to activity. | | |
| Please enclose your company definition regarding the terms above in separate sheet. | | |
| **6.3. HSE Performance Monitoring** | | |
| 1. How is health performance monitored and recorded? | | |
| 1. How is the environmental performance monitored and recorded? | | |
| 1. How id the security performance is monitored and recorded? | | |
| 1. How, and what is near miss incident reported? | | |
| 1. How frequent is the HSE performance monitored? By who? | | |
| 1. How is the security performance monitored and reported? | | |
| 1. Do you record the vehicle incident? | | |
| **6.4. Investigation and follow up of HSE Incident** | | |
| 1. What HSE incident is it identified? | | |
| 1. What process is it used to investigate the HSE incident? | | |
| 1. Who is making the HSE incident investigation? | | |
| 1. How is the findings of incident investigation follow up to ensure effective prevention for avoidance of recurrency of the same incident? | | |
| 1. How is the lesson obtained from a certain incident communicated to all relevant personnel? | | |
| *Remarks / evidence in terms of among others:*   * *HSE incident investigation procedure covering the method / technique, qualification of team, tasks & responsibilities, timeline* * *Procedure / format lesson learned including its distribution (e-mail, notice board, meeting, etc.)* * *Example of incident investigation report, including near miss investigation* * *Evidence of follow up and improvement of investigation result* * *Evidence of action tracking of investigation result (action tracking)* | | |
| **6.5. Implementation of HSE management system and Perforamnce Monitoring Effectively** | | |
| 1. Has your company ever subjected to make improvement or notification of prohibition in case of dangerous incident/accident which is legal in nature by the relevant national body, authorized body in the area of HSE, or other law enforcer authority or litigated under the law on HSE for this last five years? | | |
| *Remarks / evidence in terms of among others:*  * *Record of event or admonition toward incident or non-compliance* * *Evidence of reporting* | | |
| SECTION 7 – AUDIT AND REVIEW OF SMHSE MANAGEMENT | | |
| **7.1. Audit** | | |
| 1. Do you have written policy regarding Audit of HSE? Yes / No   If yes, please enclose. | | |
| 1. Who is involved in making audit of HSE? How is the team member selected in order to have special expertise and independent from audited activities? What qualification is required to select auditor? | | |
| 1. How does your company schedule the audit of HSE and what is its scope of audit? For example, internal, compliance with regulation, supplier/contractor, implementation of HSE management system. | | |
| 1. How does the management follow up the audit findings and ensure the effectiveness of the follow up of the said findings? | | |
| *Remarks / evidence in terms of among others:*  * *Procedure for HSE audit covering process, scope, and schedule* * *Auditor competency requirement* * *Role of management in audit process* * *Evidence of follow up of audit findings* * *Evidence of implementation such as term of reference, audit report, audit communication (e-mail, notice board, meeting, etc.* * *Evidence of action tracking of follow up of audit findings (action tracking)* | | |
| **7.2. Management review and follow up** | | |
| 1. Do you have any written procedure regarding review on HSE management system?   If Yes, please enclose its documents. | | |
| 1. How frequent is the HSE management review made and who is involved in the said process t? | | |
| 1. How is the identification control plan and improvement efforts recorded and tracked for effective implementation of follow up? | | |
| *Remarks / evidence in terms of among others:*  * *Procedure for HSE management review covering the process, scope, schedule of tasks & responsibilities* * *Evidence of implementation such as term of reference, report / result of management review and its communication (e-mail, notice board, meeting, etc.)* * *Evidence of action tracking of follow up of management review findings (action tracking)* | | |
| SECTION 8: HSE MANAGEMENT – Other Achievement | | |
| **8.1. Certification of HSE management system** | | |
| Give information regarding certification that you ever received from the certification body. | | |
| *Remarks / evidence in terms of among others:*  * *List of procedure in reference to international standard* * *Evidence of international standard fulfillment* * *Evidence of international standard certificate as already obtained (Copy of ISO 9001, ISO 14001, and OHSAS 18001 or ISO 45001 certificate which is still valid)* | | |
| **8.2. Association Membership** | | |
| Please explain the extent of participation of your company in the relevant industrial organizations (for example: petroleum, mining, etc.), trading, and government. | | |
| *Remarks / evidence in terms of among others:*  * *Evidence of membership in the body /* industrial association */ HSE such as KADIN, APINDO, IAKKI, IPA, etc.* * *Evidence of involvement or active participation in HSE aspect in the organization* * *Evidence of HSE rewards as obtained from industry or client* | | |
| **8.3. Additional characteristics of HSE management system** | | |
| Has your organization (global, regional, or local) had characteristics or other distinctiveness which is not yet explained in this questionnaire? | | |
| SECTION 9 – COMPANY SPECIFIC INFORMATION | | |
| This section is not valued. The Company can ask any specific information as required to evaluate the business partner. | | |