
PREQUALIFICATION QUESTIONNAIRE

Husky Ref. No.: 8.34.1.88

Goods/Services Title: Concrete Gravity Structure (CGS) -
Supply & Fabrication of Rebar
Materials

**THIS QUESTIONNAIRE IS TO BE COMPLETED BY VENDORS WHO ARE
INTERESTED IN SUPPLYING EQUIPMENT, MATERIALS AND/OR SERVICES TO
HUSKY OIL OPERATIONS LIMITED. THE INFORMATION PROVIDED IS STRICTLY
CONFIDENTIAL AND SOLELY FOR THE USE OF HUSKY.**

COMPLETED QUESTIONNAIRE MUST BE MAILED OR COURIERED TO:

**Husky Energy
Suite 901, Scotia Centre
235 Water Street
St. John's, NL A1C 1B6
Attention: Angela Vallis, Contract Administrator**

Company Name: _____

**The signatory of this Questionnaire guarantees the trust and accuracy of all
responses given herein, and is an authorized officer or agent of the company.**

Information submitted and completed by:

Name (Please Print)

Title

Signature

Date

To be completed by Husky:

Date Received: _____

Procurement Signoff: _____

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General Instructions

We recognize that we have many different types of suppliers / contractors with different core competencies and skill sets. In order to effectively assess your company, we require that this Questionnaire be filled out as it applies to your firm.

Husky is committed to ensuring fairness in our vendor selection process. Prequalification will be based on your company meeting our expectations for the goods and / or services to be supplied.

Submission Requirements

Vendors must submit one (1) hard copy and one (1) electronic copy of all requested documentation in an envelope or package, which must be clearly marked with the **Title and Reference** number of the Services for which they would like to be considered.

Vendors are required to submit their pre-qualification response in the following format and in the exact order as shown:

1. Company Information
2. Subcontracting
3. Work History
4. Current Organizational Structure
5. Facilities and Infrastructure
6. Capabilities Statement
7. Contractor HSEQ Requirements
8. Canada -Newfoundland and Labrador Benefits Compliance
9. Attachments
10. Additional Comments

1. Company Information

1.1 **Company Name:** _____

Street/Mailing Address of Office completing this Questionnaire

City: _____ Province: _____

Postal Code: _____

Telephone: _____ Fax: _____

Key Company Sales Contact

Canadian Head Office: _____

Street/Mailing Address: _____

Local Office: _____

Street/Mailing Address: _____

1.2 Type of Company

Sole Proprietor _____

Partnership _____

Corporation – Private _____

Corporation – Public _____

Other (please identify): _____

Please supply Certificate of Incorporation, and identify and attach as an Appendix. If private ownership, please also identify the Principle Shareholders below.

Name _____

City _____

Province/State _____

Name _____

City _____

Province/State _____

Name _____

City _____

Province/State _____

Name _____

City _____

Province/State _____

1.3 Subsidiaries, Affiliates, etc. (indicate whether wholly-owned or percent controlled)

1.4 Total Number of Employees by Geographical Location

Newfoundland and Labrador _____

Other Canadian Provinces _____

International _____

1.5 Declaration of Business Relationship (Company Owner/Management)

In accordance with the approval policy of Husky, **all Vendors shall, as a condition of supplying goods or services to Husky, make full disclosure of any existing business relationships with any Husky employee and/or contractor or immediate relatives.** If the Vendor fails to disclose an interest and/or the interest is falsely or insufficiently reported, Husky reserved the right to terminate or cancel any agreement of any kind which may have been entered into with the Vendor.

Are you a relative or of do you have a relationship with any Husky employee that would cause any real or perceived conflicts of interest?

No ☐

Yes ☐ (please specify): _____

1.6 Annual Revenue & Operating Income (CDN\$ in each of the last five years):

Revenue			Operating Income		
Year	2012	\$		\$	
Year	2011	\$		\$	
Year	2010	\$		\$	
Year	2009	\$		\$	
Year	2008	\$		\$	

Do you have 3rd party certified financial statements available for the most recently completed fiscal year? Yes _____

No _____

(If yes, please attach latest copy)

1.7 Joint Ventures

The following questions apply to Joint Ventures only;

1. Please provide a copy of your organizational structure showing all members of the Joint Venture.
2. Provide the following Joint Venture Details:
 - i. A copy of the Joint Venture Agreement
 - ii. A statement of the share equity of each of the participants
 - iii. The lead participant within the Joint Venture
 - iv. Outline how the Joint Venture will be managed with regards to objectives
 - v. How are the Key Business Objectives of each Participant reflected in the Joint Venture
 - vi. The share and nature of the work provided by each participant
 - vii. Arrangements for the transfer of systems/information technology
 - viii. How do the Participants envisage the Joint Venture developing in the future
3. In the case of a Joint Venture, detail how Bidder will optimize/merge the different participants, organization, cultures to ensure the greatest benefits are realized for Company.

2. Subcontracting

1 Please list any associated work that you would typically subcontract to other vendor(s) providing the following information for each:

- Specific type of work being subcontracted: _____
- Company Name: _____
- City: _____ Province/State: _____
- Contact Name at above noted Company: _____
- Contact Phone Number for above: _____

2 Describe the process you have for selecting subcontractors: (Also see Husky's expectations in this area for item 13 - Contracted Services and Materials – under Section 7, Contractor HSEQ Requirements)

3. Work History

Please provide a list of at least the top three (3) recent clients of your firm, with whom you have contracts for scopes of work similar to that covered by this pre-qualification process. Provide the following information for each:

1. Contract Name/Owner:

CDN \$ Value: _____ Date(s) of Contract Term: _____

Description (Contract Scope of Work. Please be specific):

Location: _____

Reference (Contact Name): _____ Telephone: _____

2. Contract Name/Owner:

CDN \$ Value: _____ Date(s) of Contract Term: _____

Description (Contract Scope of Work. Please be specific):

Location: _____

Reference (Contact Name): _____ Telephone: _____

3. Contract Name/Owner: _____

CDN \$ Value: _____ Date(s) of Contract Term: _____

Description (Contract Scope of Work. Please be specific):

Location: _____

Reference (Contact Name): _____ Telephone: _____

4. Current Organizational Structure

Please provide a current Organization Chart for your company, indicating, but not limited to, management personnel and reporting relationships. Please also identify where this organization's management personnel are located. Please ensure the organization chart indicates personnel (including names) which would be supporting the scope of work. Please also identify where these individuals are located geographically.

5. Facilities & Infrastructure

Please provide a description of the facilities & infrastructure which your company would utilize in provision of the subject services, if applicable. Please clarify whether the facilities & infrastructure which you are describing are currently occupied and utilized by your company. Please provide photographs / drawings as appropriate.

6. Capabilities Statement

Please provide an overview of your company's capabilities. In addition, please ensure that you provide a description of your company's specific capabilities as they related to the subject services being requested.

7. Contractor HSEQ Requirements

READ CAREFULLY AND ANSWER COMPLETELY

These pre-qualification questions are based on Husky's Contractor HSEQ Requirements. They are intended to establish the content and maturity of an organization's HSEQ management system.

For any **"Yes"** answer provided, Husky requires a documented reference to a policy/procedure/standard and a copy of supporting documentation which can be referenced as evidence to validate any **"Yes"** answers. Any **"Yes"** answers not supported by documentation and appropriate references cannot be evaluated and may result in disqualification. All answers may be subject to further verification efforts by Husky.

Specific examples of the types of documentation such as procedures, samples of records etc. are described below each question as a suggested way of satisfying the required supporting evidence.

All submitted documentation must be packaged in such a way as to facilitate the ease of review and evaluation of the contents. This includes specific document page and or section references for each question in the order they are presented i.e. a Procedure to support an answer for question 5.8 must come after a procedure to support 2.6.

In many cases the same procedure or document may support multiple questions, please ensure the page or section reference is clear.

For Example:

Question 9.2. Does the change process clearly define change?

Response: YES Tab 9 Management of Change Procedure ABB-MOC-OPS-1234 Section 3.1 Page 4

In some cases a specific documented procedure may not exist to satisfy the question however a process may still exist. In such a case please provide a description of the process as it exists in your organization, these processes however will be subject to further verification as necessary.

Much of this HSEQ Questionnaire can be answered by submitting the following documentation. This checklist list is ONLY A GUIDE and is not meant to be comprehensive or exclusive of other relevant information your organization may be able to provide to support your answers.

If there are any questions please contact the Husky Procurement Representative.

Document Submission Checklist	
Document	YES/NO
1. HSE Manual	
2. Quality Manual	
3. HSEQ Policy(ies)	
4. Drug and Alcohol Policy	
5. New Employee Orientation and Induction Procedure(s)	
6. Risk Management Procedure(s)	
7. Emergency Response Plan	
8. Business Recovery/Continuity Plan	
9. Equipment Maintenance Program Manual	
10. Hazardous Areas Procedure(s)	
11. Training and Competency Procedure(s)	
12. Incident Management and Investigation Procedure(s)	

13. Environmental Protection and Management Procedure(s)	
14. Management of Change Procedure(s)	
15. Document Control Procedure(s)	
16. Confidential Information Procedure(s)	
17. Project Execution Procedure(s)	
18. Contractor Management Procedures	
19. Non-Conformance Procedure(s)	
20. Supplier/Contractor Evaluation Procedure(s)	
21. Materials Receiving Procedure(s)	
22. Audit Procedure(s)	
23. Lessons Learned Procedure(s)	
SAMPLES OF:	
1. Annual HSEQ Performance Objectives, KPIs and current status	
2. Management Review Meeting Minutes	
3. Safety Meeting Minutes	
4. Safety Alerts or Bulletins	
5. Safety Observation Cards	
6. MSDS Register	
7. Risk Ranking Matrices	
8. Emergency Drill and/or Exercise Reports	
9. Job Descriptions for Management, Safety Critical Roles and those responsible for the Management System	
10. Hazardous Area Equipment Register	
11. Critical Equipment List	
12. Spare Parts for Critical Equipment Inventory List	
13. Failure Trends Analysis Report	
14. Maintenance System record for a critical system or piece of equipment	
15. Preventative Maintenance Backlog Statistics	
16. Sample of Calibration Record(s)	
17. Training Matrices	
18. Training Course Outline	
19. Incident Investigation Report	
20. Management of Change Form	
21. Internal and Supplier Audit Report	
22. Audit Schedule and current status	
23. Audit protocols or templates	
24. Corrective Action Management report and current status of all actions	
25. Purchasing/Contract Template	
26. Contractor Prequalification Questionnaire/Evaluation Form	
27. OHS Committee Meeting Minutes	
28. OHS Committee/WHRSR Membership list and Terms of Reference	

Provide HSE performance statistics for the last 3 years for the following information:

Statistics including Sub-Contractor data

ITEM	20--	20--	20--
Fatalities			
Lost Time Injuries			
# of Lost time Days			
Restricted Work Cases			
# of Restricted Work Days			
Medical Aids			
First Aids			
Near Misses			
Total Exposure Hours			
LOST TIME INJURY RATE			
TOTAL RECORDABLE INJURY RATE			
Motor Vehicle Accidents			
Reportable Environmental Spills			

Statistics for Proponent Alone

ITEM	20--	20--	20--
Fatalities			
Lost Time Injuries			
# of Lost time Days			
Restricted Work Cases			
# of Restricted Work Days			
Medical Aids			
First Aids			
Near Misses			
Total Exposure Hours			
LOST TIME INJURY RATE			
TOTAL RECORDABLE INJURY RATE			
Motor Vehicle Accidents			
Reportable Environmental Spills			

- Lost Time Injury Rate based on 200,000 person hours
- Total Recordable Injury Rate based on 200,000 person hours

1	Leadership and Accountability	YES/NO	Tab #	Document Title	Document Number	Section and Page #
1.1	Does the organization have an HSEQ Policy or policy statement?					
1.2	Does the organization have a formalized documented Management System					
1.3	Does the leadership actively and visibly participate in and promote the Management System?					
1.4	Does the organization participate in industry associations and other networking activities in order to integrate best practices?					
1.5	Are the roles, responsibilities and accountabilities within the management system known, accepted and exercised?					
1.6	Does Management communicate and encourage employee participation in the processes?					
1.7	Are clear goals and specific objectives for the management system established and is performance measured against these goals and objectives?					
1.8	<i>Is there a regular management review of the HSEQ Management System and is this communicated to all employees and stakeholders?</i>					

2	Safe Operations	YES/NO	Tab #	Document Title	Document Number	Section and Page #
2.1	Is a comprehensive safety program implemented that includes programs for safe operations of tasks?					
2.2	Is there an OHS Committee and/or a worker health and safety representative, or workplace health and safety designate in place?					
2.3	Does the organization have a Drug and Alcohol Policy?					
2.4	Does your company have a hazard prevention program?					
2.5	Is there a program in place that includes requirements for human factors, ergonomic risk considerations, fatigue management, and workplace physical and mental demands are identified, analyzed and addressed?					
2.6	Is there an industrial hygiene and medical surveillance program?					
2.7	Is there a safe handling of chemicals and/or hazardous materials system?					
2.8	Is there an approved material substance register established that clearly defines those materials that are permitted to be used at any site? (By definition, the use of any substance not identified on this list shall be prohibited).					
2.9	Is a process implemented for identifying Personal Protective Equipment (PPE) requirements, ensuring that PPE is available and functional, and training in the use of PPE is conducted for employees?					
2.10	Are procedures implemented to ensure critical information to safe and efficient daily operations is effectively communicated to all levels of the company?					
2.11	Is a positive and open safety culture established where employees are educated, encouraged and expected to examine all tasks and work methods?					

3	Risk Assessment and Management	YES/NO	Tab #	Document Title	Document Number	Section and Page #
3.1	Is there a documented risk assessment and management process or program?					
3.2	Are risk assessments conducted addressing risk to people, facilities and the environment?					
3.3	Are existing risk assessments reviewed at specific intervals?					
3.4	Are risk assessments performed by qualified personnel including, where appropriate, suitable expertise sought from outside the immediate business unit?					
3.5	Are risks prioritized to personnel, assets, the public and the environment?					
3.6	Is a follow up process in place to ensure that risk management decisions are implemented?					

4	Emergency Preparedness	YES/NO	Tab #	Document Title	Document Number	Section and Page #
4.1	Does the organization have an emergency management system?					
4.2	Is the emergency management system based on specific hazards and risk assessments?					
4.3	Are the incident coordination and area emergency response plans integrated with relevant crisis management plans?					
4.4	Are incident coordination and area emergency response plans clearly communicated to all employees, contractors and stakeholders?					
4.5	Are simulations, drills or exercises conducted on a periodic basis?					
4.6	Are emergency preparedness and response plans reviewed periodically and updated?					
4.7	Are emergency response personnel trained and equipment and facilities maintained?					
4.8	Is a business recovery plan developed and implemented?					
4.9	Are operating partners and contractors included in the emergency response plans and is there joint cooperation with them?					

5	Reliability and Integrity	YES/NO	Tab#	Document Title	Document Number	Section and Page #
5.1	Is there a process in place to establish and implement various operating, maintenance, monitoring, test, calibration, and inspection procedures?					
5.2	Is there a critical elements (equipment, systems, processes etc.) list?					
5.3	Are the inspection, calibration, maintenance and repair requirements associated with critical elements identified?					
5.4	Has a spare parts inventory been developed for critical equipment?					
5.5	Have specific procedures and programs been implemented to manage the hazards associated with equipment used in identified hazardous areas?					
5.6	Are failure trends tracked, reviewed and analysed to identify persistent problems?					
5.7	Are procedures implemented to manage the temporary disarming or deactivation and reactivation of critical equipment and devices?					
5.8	How is the maintenance schedule and frequency developed for inspection, maintenance and repair operations?					
5.9	Are critical tasks that require specific controls and competencies identified?					
5.10	Is there a process for reporting of deficiencies and tracking the actions to resolve them?					
5.11	Is there a procedure in place to describe how work performed on a piece of equipment is controlled and recorded?					
5.12	Is there a process implemented to plan, schedule and coordinate asset operations and work activities, for example shutdowns?					
5.13	Is there a process implemented to identify spare parts, support and test equipment for critical items and ensure they are available when needed?					

5	Reliability and Integrity	YES/NO	Tab#	Document Title	Document Number	Section and Page #
5.14	Is there a system to ensure materials/spare parts/equipment are available in inventory and a documented system to ensure the integrity of materials/spare/ parts/equipment is maintained?					
5.15	Is there a system implemented to monitor, report and manage maintenance, inspection, testing and monitoring backlogs against performance goals?					

6	Personnel Training and Competency	YES/NO	Tab #	Document Title	Document Number	Section and Page #
6.1	Do job descriptions contain required competencies for all positions carrying out activities that may affect operational integrity?					
6.2	Does personnel recruitment, include fit for work assessments and pre-employment medicals, where appropriate?					
6.3	Is there a process for screening, selection, placement and ongoing assessment of the qualifications and abilities of personnel to meet specified job requirements?					
6.4	Is there initial, ongoing and periodic refresher training to meet job and regulatory requirements?					
6.5	Do in-house training sessions set out clear deliverables?					
6.6	Is there a competency assessment and management program?					
6.7	Are periodic reviews conducted to ensure appropriate staffing levels are maintained to assure safe and efficient operations?					
6.8	Do new or transferred employees undergo appropriate site orientation and induction training? (At a minimum it shall include HSEQ rules, management systems and emergency procedures).					
6.9	Does the organization monitor, measure and ensure policy, process and regulatory compliance of its workforce?					

7	Incident Management	YES/NO	Tab #	Document Title	Document Number	Section and Page #
7.1	Is there an incident management system existing to ensure all HSEQ incidents are reported, and tracked?					
7.2	Is there a process to ensure that serious incidents and subsequent investigations are reported to clients such as Husky Energy?					
7.3	Are incidents categorized and investigated at a level appropriate for that categorization?					
7.4	Are incident investigations conducted using proven investigation techniques and are the results of the investigation documented?					
7.5	Is incident data analyzed and reviewed?					
7.6	Is there a system used to track preventative and corrective follow up actions?					
7.7	Are lessons learned and near misses communicated within the organization?					
7.8	Is there a process for the communication and distribution of internal and external safety alerts or bulletins?					

8	Environmental Management	YES/NO	Tab #	Document Title	Document Number	Section and Page #
8.1	Are environmental management systems, established, implemented and monitored to address environmental impacts and demonstrate compliance with regulations?					
8.2	Are local site performance indicators and targets set to drive continual improvement in managing waste, emissions and discharges, and energy efficiency?					

9	Management of Change	YES/NO	Tab #	Document Title	Document Number	Section and Page #
9.1	Is there a documented management of change process to consider all changes that directly affect facilities, assets and people?					
9.2	Does the process clearly define change?					
9.3	Does the process ensure the documentation and tracking of change requests?					
9.4	Does the process evaluate the health, safety, environmental and quality risks of proposed changes?					
9.5	Does the process consider requirements for personnel training?					
9.6	Does the process include management review and approval?					
9.7	Does the process consider both permanent and temporary changes?					
9.8	Does the process consider the requirements for the updating of documentation? (i.e.: drawings, plans, procedures, etc.)					
9.9	Is there a system in place to ensure that the original scope and duration of temporary changes are not exceeded without review and formal approval?					
9.10	Is there a process for effective communication of changes to the affected parties or individuals?					

10	Information, Documentation and Effective Communications	YES/NO	Tab #	Document Title	Document Number	Section and Page #
10.1	Is there document management system to manage technical and other documentation?					
10.2	Is technical and management system documentation controlled to include peer review and management approval to manage creation and change?					
10.3	Is information on applicable laws and regulations, licenses, permits, codes, standards and practices accessible?					
10.4	Are employee health, medical, occupational exposure and training records maintained with appropriate confidentiality?					

11	Compliance Assurance and Regulatory Advocacy	YES/NO	Tab #	Document Title	Document Number	Section and Page #
11.1	Is there a system in place to identify and ensure ongoing compliance with regulatory requirements and codes and is it documented as part of the management system?					
11.2	Is the operation regularly audited or reviewed to ensure regulatory and process compliance?					
11.3	Is there a process for reporting and managing deviations from regulatory or corporate requirements?					
11.4	Is there a process in place to identify, track and comment on proposed legislation, regulations and emerging policy issues?					

12	Design, Construction Commissioning, Operating and Decommissioning	YES/NO	Tab #	Document Title	Document Number	Section and Page #
12.1	Is a project execution process used to incorporate health, safety, environment, loss prevention, and technical standards requirements?					
12.2	Are operability, maintainability, reliability and total life-cycle cost systematically considered in the planning, design and construction process? Is operations and maintenance expertise fully integrated early into the process at the design and project stage?					
12.3	Are approved health, safety, environment and loss prevention guidelines, design practices and standards, that meet or exceed applicable regulatory requirements, and encompass responsible requirements where regulations do not exist, fully utilized in the design, procurement and construction of all new or modified facilities?					
12.4	Are risk management practices implemented to ensure designs meet integrity objectives?					
12.5	Are human factor principles fully assessed and incorporated in the project?					
12.6	Are deviations from approved design practices and standards, or from the approved design permitted only after review and approval by the designated technical authority, and after the rationale for the decision is fully documented?					
12.7	Are quality assurance processes in place to ensure that facilities and materials specified, received and used meet specifications and that construction is in accordance with the applicable standards?					
12.8	Is a formal pre-startup review performed and documented on all new or modified facilities prior to operation to confirm that they meet all applicable technical and operational requirements?					
12.9	Is a process in place to ensure that any performance or integrity related issues identified during the course of commissioning, operating and decommissioning are captured, assessed and, where appropriate, resolved?					

13	Contracted Services and Materials	YES/NO	Tab #	Document Title	Document Number	Section and Page #
13.1	Is there a supplier or contractor pre-qualification and selection process?					
13.2	Are scopes of services and deliverables, performance measures and standards, quality, customer and regulatory requirements as well as provision of trained and competent personnel clearly defined in the contract/purchase documentation?					
13.3	Is there a process to ensure that received materials and services are verified against requirements?					
13.4	Are interfaces with suppliers identified and managed?					
13.5	Are materials and services evaluated using a risk ranking process to identify potential risk and risk mitigation measures?					
13.6	Is there a process to identify non-conforming products and services and to prevent their release or inadvertent use?					
13.7	Is supplier/contractor performance monitored and audited?					
13.8	Does the organization maintain a preferred bidders list of existing pre-qualified suppliers/contractors?					
13.9	Does the organization have a process to manage and evaluate sole source sub-contractors?					

14	Performance Assessment and Continuous Improvement	YES/NO	Tab #	Document Title	Document Number	Section and Page #
14.1	Are HSEQ performance indicators established and evaluated?					
14.2	Is there an internal audit process?					
14.3	Are operations regularly assessed to determine if HSEQ performance objectives are met?					
14.4	How are the audit program, specific scopes and frequency determined?					
14.5	Do audits follow established protocols and are they conducted by competent auditors, or audit teams, including expertise from outside the immediate unit?					
14.6	Are findings from audits recorded, discussed and agreed with the assessed party?					
14.7	Do audited parties develop documented action plans to address audit findings and are they tracked?					
14.8	Is the effectiveness of management system reviewed?					
14.9	Is there a preventive and corrective action process implemented addressing inspections, non-conformances, and customer feedback?					

8. Technical Requirements

The purpose of this prequalification is to fully understand and appreciate the extent and capability of companies/groups qualified to potentially carry out the scope of work for the supply and fabrication of rebar (Long Lead Item) required for the White Rose Extension Project.

The scope of work being proposed by Husky is the subject of this Prequalification and comprises the supply and fabrication of rebar including, staging, warehousing and delivery.

Please answer the following technical questions as an attachment to your submission. Provide all substantiating information to support your answer. In order to achieve a more accurate evaluation result and assist us with the evaluation of your response, please ensure that all the supporting documentation is organized based upon each of the questions asked, 8.1, 8.2, 8.3 etc. Failure to comply with this requirement may result in your response not being evaluated.

8.1	<p>Does your company have previous and/or current experience in supplying and fabrication of rebar in accordance with the applicable CSA regulations for use in the province of Newfoundland and Labrador?</p> <p>Please provide explicit supporting documentation and references of any such past and current related project(s) to support a "yes" answer.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.2	<p>Does your company have previous and/or current experience in supplying and fabrication of rebar (T-headed or L bars) that can be used in slip-forming construction of concrete gravity based structure projects?</p> <p>Please provide explicit supporting documentation and references of any past and current related project(s) to support a "yes" answer.</p> <p>Include the average cutting/bending/fabrication rate for these projects</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.3	<p>Does your company have schedule and/or commitments that could affect Company's planned delivery in line with the EOI scope?</p> <p>Please provide explicit supporting documentation of schedule and/or commitments to support either answer by providing <i>the following information on a project by project basis</i>:</p> <ul style="list-style-type: none"> • <i>Maximum manpower (direct, indirect and project management)</i> • <i>Trade distribution, please advise for each trade</i> • <i>Maximum capacity in tonnes per month and fabrication rates.</i> • <i>Any special transportation, and facilities used during execution of the work.</i> 	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.4	<p>Does your company have previous and/or current experience in supplying and fabrication of rebar with mechanical couplers that can be used in slip-forming construction of concrete gravity based structure projects?</p> <p>Please provide explicit supporting documentation and references of any past and current related project(s) to support a "yes" answer.</p> <p>Include the average cutting/bending/fabrication rate for these projects</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.5	<p>Does your company own the facilities and relevant equipment for the EOI scope?</p> <p>Please provide a specific list of equipment and site facilities owned by the respondent with explicit supporting documentation.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.6	<p>Does your company have access to staging and warehousing facilities in the Argentia area suitable for the EOI scope?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

	Please provide explicit supporting documentation to support a “yes” answer	
8.7	Does your company have trucking capability to load rebar reinforcement from your facility either by road or by sea? Or do you have any agreement with other companies to provide such this service?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide explicit supporting documentation to support a “yes” answer.	
8.8	In case of transportation by sea, does your company have direct jetty load-out facilities and priority access (authorized uninterrupted access) to any quayside in Newfoundland? Please provide supporting drawing(s).	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide explicit supporting documentation to support a “yes” answer.	
8.9	Or do you have any agreement with other corporations to have uninterrupted access to a quayside?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide explicit supporting documentation to support a “yes” answer.	
8.10	Does your company have the required personnel, management, and organizational structure to execute this work in line with the EOI scope?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide organizational chart and explicit supporting documentation of qualifications and experience for all proposed management, lead and key personnel assigned for execution of the work to support a “yes” answer.	
8.11	Does your company have the capability to provide a project execution plan that fully defines the requirements of the Scope of Work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide an overview of the project execution including sequences, equipment, transportation, facilities, locations, management, manpower and other information that may assist in fully understanding and evaluating your abilities and capacities with respect to this EOI Scope of Work. Please also describe what work/services will be self-performed and what work/services will be sub-contracted.	
8.12	Has your company had any industrial disputes that have accrued over the last two years 2012- 2013?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide explicit supporting documentation of any past and current related project(s) to support a “yes” answer.	
8.13	Does your company hold ISO certification? Please advise which relevant standard(s) your company follows in the execution of fabrication at your facilities and or for projects recently executed.	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide explicit supporting documentation to support a “yes” answer.	
8.14	Does your company have union agreements that prevail within the fabrication facility? Please advise expiry dates.	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please provide explicit supporting documentation to support a “yes” answer.	
8.15	Does your company have a Contracting and Procurement of Materials Process?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If so, please explain how your company handles the Procurement of Materials in support of the Work Scope? Please provide examples for the following:	

	<ul style="list-style-type: none"> • <i>provide a copy of the Contractors materials procurement process including reporting status, tracking reports and other relevant information as applicable.</i> • <i>outline how quality checks throughout the Procurement Process are addressed and how any subcontractor or vendor surveillance is handled?</i> • <i>how do you ensure subcontract work is subject to the same levels of control as your own?</i> • <i>do you accept certification in lieu of final inspection? If so, how do you ensure they are adequate?</i> • <i>do you have an approval /review process for subcontracts and suppliers?</i> • <i>outline the contractor and subcontractor selection process and adherence to Canada – Newfoundland and Labrador Benefits requirements.</i> 	
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9. Canada-Newfoundland and Labrador Benefits Compliance

Husky Energy strongly supports providing opportunities to Canadian and in particular Newfoundland and Labrador companies and individuals, on a commercially competitive basis. Pre-qualified companies will be required to complete a Canada/Newfoundland and Labrador Benefit Questionnaire. Will you comply with requirements of Husky Energy (or any governmental authority) with respect to benefits and with all applicable guidelines of Husky Energy?

☐

Yes

☐

No

10. Attachments

Please indicate all attachments:

No.	Attachment	Yes/No
1.	Certificate of Incorporation.	
2.	Declaration of Residency.	
3.	Certified 3 rd Party Financial Statements.	
4.	Facilities & Infrastructure photographs/drawings.	
5.	Copy of Organization Chart (with names) for personnel supporting the contract scope of work.	
6.	A written statement indicating that there are no outstanding HSE charges, stop work orders or regulatory violations against your company.	
7.	A written statement indicating there are no outstanding non-conformances or audit action plans stemming from a Husky conducted Health, Safety, Environment and Quality supplier audit.	
8.	Copy of the most recent customer satisfaction survey relating to customer perceptions and customer satisfaction.	
9.	Is a Certificate of Clearance from the provincial Workplace Health, Safety and Compensation Commission (WHSCC) available upon request by Husky? (Note: The Workplace Health, Safety and Compensation Act requires all employers performing work in Newfoundland and Labrador to register with the Commission. Source: http://www.whscc.nf.ca/employers/Emp_RegisteringYourBusiness.whscc .	

11. Additional Comments

Sample Declaration of Residency

Vendor represents that * _____ for Canadian Income tax purposes

** **is** a resident of Canada ☐

is not a resident of Canada ☐

Furthermore, we attach a **Certificate of Incorporation** and undertake to immediately inform Husky Oil Operations Limited of any future change in our company's tax status.

Name: _____

Title: _____

Signature: _____

Date: _____

* (please include complete entity name)

** (please check as appropriate)