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| <p>ISSUE: 06.11.2017 REVISION: 0 DATE : 06.11.2017 Ref: SCD/VQPU-ROOK</p> | <p>YANBU ARAMCO SINOPEC REFINING COMPANY (YASREF) SUPPLY CHAIN DEPARTMENT Vendor Qualifications & Performance Unit</p> |  |
| <p>Out of Kingdom Vendor Registration Form</p> | | |

Thank you for your interest in registering your Company with YASREF Supply Chain Department. Registration with YASREF is required to determine vendor's capability to perform work and supply materials and equipment and enter into business with YASREF. Your Company will be required to submit certain **Required Documents** as well as complete the **Registration Form**.

It is important to note that this registration process merely provides YASREF with current contacts and other basic information about your company. This registration is different from contractor prequalification which is performed separately in connection with a specific contract or group of similar contracts.

After successfully registering with YASREF, YASREF will refer to your Contractor Profile when searching for contractors who are potentially qualified for certain jobs.

Important: Please prepare all required documents in ENGLISH, and then have them ready for proceeding any further. Please make sure that the name on the letter head of the Company should match the official name on the Commercial Registration/Business Permit. YASREF has the right to demand for documentation hard copies whenever required.

GENERAL REQUIRED DOCUMENTS

1. Complete the Out of Kingdom Registration Form.
2. Letter addressed to the Vendor Qualification & Performance Unit of YASREF Supply Chain Department requesting to be registered as a vendor with YASREF with a brief explanation of the main Products/Services your Company provides to be signed by your Company owner or officer, who is specified in your Company's Commercial Registration Certificate (Business Permit or Government License) stamped with company stamp and authenticated by the Chamber of Commerce or at least Public Notary.
3. "Ownership and Authorization". Letter from the company who are authorized to signed a contract/s or purchase order/s. List down all personnel/s including contact details and emails. It must be signed & stamped by owner/business partner or authorized representatives.
4. Latest valid Commercial Registration Certificate (or Government License/VAT ID/Business Permit No.). Please note that your Commercial Registration or Licenses must specifically authorize you to conduct the type of services you indicate in your application letter.
5. A copy of a valid Industrial License Certificate authenticated by Chamber of Commerce in the country of origin. (For Manufacturer) if applicable.
6. A Letter from the bank using original bank letter head detailing you bank account details. As per mentioned in Page 4.
7. A sketch/map showing the location of the company's offices/factory and warehouses, giving reference to a street, road, or known building.
8. Company Organization Chart.
9. List of Major Customers.
10. Company Profile.
11. ISO 9001 Certification (if available).
12. Acquisition & mergers (if applicable)

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ADDITIONAL REQUIREMENTS FOR MANUFACTURER

1. Product Certifications.
2. Plan capacity for each product.
3. Sales Brochures/Product Catalog.
4. A letter of introduction identifying as a Manufacturer Company and detailing business activity and full information about their agency, if any in Saudi Arabia including: Name, Address and contact.
5. List of Major sub-suppliers.
6. Plant total capacity per year.
7. Uncontrolled Copy of Quality Management System Manual.
8. Quality and Technical Organization Chart.
9. Code Stamps/Certification & Experience (Provided by the Technology / Product Owner).
10. List of Quality Procedure.
11. Patents/Manufacturing Licenses (if available).
12. List of Major Equipment installed at your plant.
13. Technical Data/Specifications for each product.
14. List of all products with full description/Technical Data/Specifications for each product.

CAPABILITIES SURVEY

Assessing vendor's financial strength is a mandatory requirement. Therefore, it is YASREF's policy to determine the financial capability of potential vendors to determine vendors' capability to perform work and supply material and equipment. The information requested below will assist in evaluating the capability of your company to become a vendor. Please complete and return this survey sheet promptly to avoid any bid disqualification resulting from delay in approval of your company as a vendor. Information provided by your company and developed by YASREF will be treated as confidential. **For legibility, we ask that the required information be typed.** All appropriate boxes must be filled. Attach additional pages as needed.

Your signature below certifies that the information you provide in this form is true and accurate and you further acknowledge that the provision of any false or inaccurate information could result in you being rejected or removed as a YASREF vendor.

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|-------------------------|-------------------------|------------------|-----------------|
| Type of Company: | OCM-Manufacturer | OEM-Manufacturer | Trader/Supplier |
| | Agent/ Authorize Distr. | Service Provider | Others: |

| | | |
|--------------------------|------------------|--------|
| Service Required: | New Registration | Update |
|--------------------------|------------------|--------|

Full Company Name (Legal Name):

| | | |
|---|------------|------------------|
| Commercial Registration No./ Government ID No./Business ID#: | Issued at: | Date of Issue: |
| | | Date of Expired: |
| | | Country: |

| | | |
|------------------|--------------|-----------------|
| Mailing Address: | P.O Box: | Street Address: |
| City: | Postal Code: | |

| | | | | |
|------------|----------|-------------|-----------------|------|
| Phone No.: | Fax No.: | Mobile No.: | Company E-Mail: | URL: |
|------------|----------|-------------|-----------------|------|

Subsidiary of:

| | |
|--|-----------|
| Person to be contacted for future RFQs/RFPs: | Position: |
| | Email: |

List of any branch offices with complete addresses:

Type of business ownership (Check applicable box):

Sole Proprietorship
 Partnership
 Corporation

Type of products/services you are currently handling as per your latest renewed Commercial Registration or Business Permit.

| | |
|------------|-----------|
| Materials: | Services: |
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |
| 5. | 5. |
| 6. | 6. |
| 7. | 7. |
| 8. | 8. |
| 9. | 9. |

Others(Please specify):

| | | |
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| FINANCIAL INFORMATION |
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| Total of assets of your company | Annual trading turnover or sales of your company |
| | |

A letter from the bank using the original bank letter head that includes:

- a) The Bank Account Name/Account Holder, Account Number, IBAN (if applicable), Currency and SWIFT Code which is used by your company as mentioned in the below table.
- b) A description of the length of time for which your company has maintained an account with the bank.
- c) A description of the type of services that the bank normally provides to your company.
- d) Must be signed & stamped by the bank stamp.

| | | | |
|---------------|--------------|-------------|-----------|
| Name of Bank: | Branch Code: | Account No. | Currency: |
| | | | |

| | | |
|----------|----------------------------------|-------------|
| IBAN No. | Account Holder/Beneficiary Name: | SWIFT Code: |
| | | |

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| Accountant Name: | Position: |
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| Name of person authorized to open or amend letter or credit: | Name of custom broker used: |
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| Have you previously provided Materials against YASREF Purchase Orders? Yes No | If yes, list purchase order numbers, dates and amounts. |
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| DESIGNATED CONTACTS |
|----------------------------|

Authorized Contact Information No. 1 Senior Officer (Owner, Chief Executive Officer or Other Authorized).
Authorized Contact information No. 2 Assign Primary Contacts (single point of contact).

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| Contact Information No. 1 |
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|-----------------------------|-------------------------------------|
| Name: | Country of Citizenship/Nationality: |
| National ID/Government I.D. | Passport No. |
| Position: | E-mail address: |
| Telephone No.: | Alternative e-mail address: |
| Fax No.: | Mobile No.: |

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| Contact Information No. 2 |
|----------------------------------|

| | |
|-------------------------------|-------------------------------------|
| Name: | Country of Citizenship/Nationality: |
| National I.D./Government I.D. | Passport No. |
| Position: | E-mail address: |
| Telephone No.: | Alternative e-mail address: |
| Fax No.: | Mobile No.: |

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PRODUCTS INFORMATION (APPLICABLE FOR MANUFACTURER)

List all products manufactured at this plant

| Product | Machinery Capacity/Year | Current Production Level |
|---------|-------------------------|--------------------------|
| | | |
| | | |
| | | |

List limitation of your products (e.g. : Size, Rating, etc...)

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Code Experience and stamps or certificates (Specify No.)

| | | | | | |
|------|-----------|------|------|------|------|
| ASME | ASME VIII | ANSI | SASO | NEMA | TEMA |
| ASME | API | AWS | AISC | NFPA | ISO |
| IEC | OTHERS | | | | |

If others not mentioned please type below additional information:

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Indicate the size of the warehouse in detail, including any air-conditioned portion.

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Vendor Qualifications & Performance Unit



Out of Kingdom Vendor Registration Form

OWNERSHIP INFORMATION

Names of your company's major shareholders or partners of share, nationality and National I.D. or Government I.D.

| <u>Name of Owner or Partner</u> | <u>% Share</u> | <u>Nationality</u> | <u>Passport No./Gov't I.D.</u> |
|---------------------------------|----------------|--------------------|--------------------------------|
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Names of YASREF employees and their relatives (spouses, parents, sons & daughters) who are partners or have an ownership stake, or are you employees (if applicable):

| Name of YASREF Employee | Name of Employee or Partner who is Related to YASREF Employee | Relationship to YASREF Employee |
|-------------------------|---|---------------------------------|
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REGISTRATION SUBMISSION

Before to submit your registration form, please first make sure that:

1. All data you entered in this registration form are 100% accurate and up-to-date.
2. The documents; "Ownership and Authorization" letter attached with the registration form is:
 - a) Signed by an officer in your Company with full authority to make the delegation of authority and designations provided in the letter; and
 - b) Authenticated by Chamber of Commerce or at least Public Notary.

In signing this registration form below on behalf of _____, we undertake to notify YASREF promptly of any change such as: Ownership, Bank Accounts, Government Documents, Company Representatives, Telephone Number/s, E-mail, Company Websites and so on. Upon such a change/s, _____ shall promptly provide YASREF with certified copies of all documents to establish the above changes/s.

| | | | | |
|-------|--------|------------|-------|----------------|
| Name: | Title: | Signature: | Date: | Company Stamp: |
|-------|--------|------------|-------|----------------|

Avoid application mistakes:

To increase your chances for quick processing of your registration application, double check your application for accuracy of information.

Important Instructions:

After completing your submission of the above referenced information and attaching all required documents, please submit the required documents through e-mail softcopies maximum 10MB size at vendor.registration@yasref.com. If it reached more than 10MB size, kindly make a separate e-mails part 1&2.

- Please attach additional pages, if necessary

For more assistance with your registration, please email your inquiries to vendor.registration@yasref.com or call +966(01)4-398-1742

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FOR YASREF USE ONLY

Material Groups:

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____
7. _____

Service Groups:

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____
7. _____

| | Name | Signature | Date |
|--------------|------|-----------|------|
| Assigned By | | | |
| Group Leader | | | |

SAP Vendor No.: _____ Entered By: _____ Date: _____

Reviewed By: _____ Date: _____