



COMPANY: _____
 ADDRESS: _____
 TEL- FAX- E-MAIL: _____
 PERSON RESPONSIBLE: _____

QAT - TECHNICAL ASSESSMENT QUESTIONNAIRE: Domestic Suppliers **Cemig Suppliers Award**

OBJECTIVE:

The purpose of this questionnaire is to obtain information from suppliers in order to determine whether they should be included or maintained in the Cemig Assured Material Supply Program and this questionnaire should be sent to CEMIG for analysis.
 A technical and process assessment by CEMIG shall only be scheduled following approval of this questionnaire.

FILLING OUT THIS QUESTIONNAIRE:

Fill out the top section of this questionnaire with the name, address, telephone and fax numbers, e-mail address of the company and the name of the person responsible for filling it out. Analyze whether the requirements for the questionnaire have been met and fill it out by marking the respective "YES" or "NO" columns. .
 When recording a "YES" answer, the information requested must be provided in the questionnaire itself or in documentation attached to it.
 When opting to send documents, "non-controlled copies" should be sent, which will not be returned by CEMIG.
 Original documents that provide proof must be available to the CEMIG assessor at the fabrication local, for consultation and assessment.
 In the event that a requirement is considered "Not Applicable", the company must enter the letters "NA" in the NO column and justify why the requirement is not applicable.

COMPLEMENTARY INFORMATION:

The Environment, Health and Safety and Social Responsibility requirements are not subject to assessment (they do not interfere with the result), as they shall be included in the supplier data base.
 The legal requirements are subject to a specific assessment and may lead to the non-approval of the supplier, at CEMIG's discretion.

1. TECHNICAL ASSESSMENT

ITEM	REQUIREMENT	EVIDENCE REQUESTED	WEIGHT	RESPONSE
1.1	Does the company have a Quality Management System, Health and Safety Management System and Environmental Management System based on the NBR ISO 9001, NBR ISO 14001 and OHSAS 18001 norms, certified by an authorized body?	Please State: Certifying body, Certification scope, Certificate number, Certificate expiry date.	2	<input type="text"/>
1.2	Does the company make available, in physical or electronic form, the domestic / international norms pertinent to its products?	Please state the norms available	3	<input type="text"/>
1.3	Are information technology/software resources employed to optimize and increase productivity in processes in the company's technical activities (design, production, testing)?	Please state activities in which information technology / software resources are utilized	1	<input type="text"/>
1.4	Is the layout rational and does it guarantee good production flow, minimizing transport distances and facilitating maintenance?	Please state total area of the industrial facility and that of each sector, or send a copy of the layout (blueprint).	2	<input type="text"/>

1.5	Is there a depot to receive and store raw materials with a sufficiently large, organized and identified area?	Please provide the total covered area of the depot	2	<input type="text"/>
1.6	Does the company have equipment for moving loads, with adequate capacity?	Please list the equipment used for moving loads and the respective capacities	2	<input type="text"/>
1.7	Does the company maintain control over the state of repair/maintenance of its own fleet or that of controlled companies, as well as the training of drivers with regard to the transport of finished products?	Please state the vehicles used and the respective years in which they were fabricated	1	<input type="text"/>
1.8	Are finished products packaged in accordance with clients' technical specifications or, in the absence of such, does the company take adequate measures to ensure the integrity of the products during transport?	Please state the size the covered shipping area	2	<input type="text"/>
1.9	Does the company offer, systematically, training and awareness programs in occupational safety, the environment and activities that affect the quality of the product?	Please state, for the past 12 months, the number of hours of training and awareness programs offered.	2	<input type="text"/>
1.10	When planning and controlling its activities, does the company produce fabrication and inspection schedules that are periodically updated?	Model (blank) of schedules	2	<input type="text"/>
1.11	Are new products developed by the company or projects with planned alterations validated (through type tests, calculations and performance tests, and so on) in order to ensure that they are appropriate for the intended use and meet client requirements?	Please state the means of validation	2	<input type="text"/>
1.12	Are there criteria for the selection of raw material suppliers that consider quality, safety and environmental requirements?	Please state the raw materials supplier selection criteria	1	<input type="text"/>
1.13	Are the raw materials acquired inspected using tests upon reception or an analysis of testing certificates issued by the supplier?	Please state the type of inspection adopted for each raw material	3	<input type="text"/>
1.14	Is the fabrication process, including the machinery and tools, technologically adequate and does it meet the requirements of CEMIG's Technical Specifications for the product?	Please state the main machinery and tools utilized in the fabrication process	3	<input type="text"/>
1.15	Does the company conduct periodical maintenance of machinery and equipment?	Please state which machinery and equipment receive periodical maintenance	1	<input type="text"/>
1.16	Is there a tracking system that allows for the identification of the raw materials lots utilized in the fabrication of the products?	Please state which raw materials are tracked	2	<input type="text"/>

1.17	Is the measurement and monitoring equipment duly calibrated to INMETRO's RBC - Brazilian Calibration Network traceable standards?	Please provide a list of the devices, dates of the last calibration, location where the calibration was performed and the date of the next calibration	3	<input type="text"/>
1.18	Does the company have the necessary measurement equipment for conducting all the routine tests listed in CEMIG's Technical Specifications for the product?	Please provide a list of the measurement equipment (own) available at the company	3	<input type="text"/>
1.19	Is a final inspection of the product conducted in accordance with the requirements of CEMIG's Technical Specifications, including the issuance of testing reports, independent of the inspection being monitored by CEMIG or another client?	model (blank) of the testing report	3	<input type="text"/>
1.20	Are non-conforming products identified and separated from the other products?	Please state how non-conforming products are identified and separated	1	<input type="text"/>
1.21	Does the company perform corrective actions in order to eliminate the cause of non-conformities in products and prevent their repetition?	Please state the most recent corrective action and the result obtained	1	<input type="text"/>
1.22	Is there a sector or person designated to render technical assistance and provide service under the guarantee for the product supplied?	Please state the number of employees and their positions at the company	2	<input type="text"/>
1.23	Is the waste generated during the industrial activities treated and disposed of correctly?	Please state what waste is generated and the means of treatment and final disposal	2	<input type="text"/>
1.24	Does the company have plans for dealing with environmental and safety emergencies in activities that involve situations of risk and does it train its workforce to face these situations?	Please state which plans exist and the number of trained employees	2	<input type="text"/>
1.25	Do employees utilize Personal Protective Equipment, with CAs (Approval Certificates from the Ministry of Labor) as required in accordance with the fabrication unit risk maps?	Please list the Personal Protective Equipment utilized	3	<input type="text"/>
1.26	Is the storage of combustible liquids, flammable liquids and natural gas in conformity with NR-20?	Please state the types of flammable materials stored at the company.	2	<input type="text"/>
1.27	Does the company have, at its fabrication facilities, firefighting equipment that is compatible with NR23?	Please state the quantity of fire extinguishers (ready for use) installed at the company	3	<input type="text"/>
1.28	Does the company, if it has a laboratory for high or low voltage electrical tests, have interlocking, signage and protection devices?	Please state which protection devices are utilized	3	<input type="text"/>

1.29	Prior to beginning inspection activities that involve electrical testing, are risk analyses performed and registered in accordance with NR-10?	Risk analysis form	2	<input type="text"/>
1.30	Does the company provide similar products/equipment to the national electric energy utility companies?	Please list the main electric energy utility companies and the respective products	2	<input type="text"/>

1.1 COMPLEMENTARY INFORMATION - ENVIRONMENTAL MANAGEMENT

ITEM	REQUIREMENT	EVIDENCE REQUESTED		OBSERVATIONS
1.1.1	Does the company have an Environmental Management System based on the NBR ISO 14000 norm, certified by an authorized body?	Please state: certifying body, Certification scope, Certificate number, Certification expiry date	<input type="text"/>	
1.1.2	Does the company undertake actions to prevent the main environmental impacts caused by its processes, products or services, and does it regularly engage in control and monitoring activities?	Please list the activities monitored and the preventive actions	<input type="text"/>	
1.1.3	Is information provided to clients on the characterization and composition of the fabricated products and the possible damage they may cause to the environment during transport, handling, operation, maintenance and final disposal?	Please state through which means and what information is provided	<input type="text"/>	
1.1.4	Does the company have programs to reduce consumption of renewable and non-renewable natural resources?	Please list the programs and natural resources	<input type="text"/>	
1.1.5	Is there a selective waste collection system at the company's facilities?	Please state which materials are collected	<input type="text"/>	
1.1.6	When contracting services and purchasing materials are there clauses related to environmental requirements and compliance with legislation?	Please list the clauses	<input type="text"/>	

1.2 COMPLEMENTARY INFORMATION - OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT

ITEM	REQUIREMENT	EVIDENCE REQUESTED		OBSERVATIONS
1.2.1	Does the company have an Occupational Health and Safety Management System based on the OHSAS 18000 norm, certified by an authorized body?	Please state: certifying body, Certification scope, Certificate number, Certification expiry date	<input type="text"/>	
1.2.2	Does the company conduct and implement the recommendations of ergonomic work analyses, which cover the assessment, transport and disposal of materials, furniture, equipment and environmental conditions at work stations, in accordance with NR-17?	Please provide the name of the person responsible for the ergonomic analyses and the date on which they are performed	<input type="text"/>	
1.2.3	Are there emergency care plans for events of incidents or accidents, documented, for the company's activities?	Please list the plans and activities	<input type="text"/>	

1.3 COMPLEMENTARY INFORMATION - SOCIAL RESPONSIBILITY

ITEM	REQUIREMENT	EVIDENCE REQUESTED		OBSERVATIONS
1.3.1	Does the company have a Social Responsibility Management System, based on the SA 8000 norm, certified by an authorized body?	Please state: certifying body, Certification scope, Certificate number, Certification expiration date	<input type="text"/>	
1.3.2	Does the company require its suppliers, contracted parties and service providers in contracts or acquisition documents, to not employ child labor, in accordance with the pertinent legislation?	Please state the requirements	<input type="text"/>	
1.3.3	Have there been any identified instances during inspections of the workplace of child labor, conditions of forced labor or conditions analogous to slavery?	evidence to be provided during the assessment	<input type="text"/>	
1.3.4	Has the company been the object of, in the last three years, judicial or administrative litigation resulting from practices involving forced labor or analogous to slavery, child labor, discriminatory practices with regard to the hiring of personnel, moral harassment, sexual harassment or discrimination involving race, gender, age, nationality, sexual orientation, physical disability or religion?	evidence to be provided during the assessment	<input type="text"/>	

1.3.5	Does the company guarantee free union association and its employees' right to bargain collectively?	evidence to be provided during the assessment	<input type="text"/>	
1.3.6	Which benefits does the company grants, at its own free will, to its employees, in addition to legally regulated remuneration and programs?	Please state the benefits granted and the manner in which it is shared and what costs are borne by the employee	<input type="text"/>	
1.3.7	Does the company make available and announce a communication channel (or Client Service System - SAC) that enables clients to offer suggestions, opinions and complaints regarding its products?	Please state the communication channel	<input type="text"/>	
1.3.8	Does the company sponsor or engage in social actions/projects, voluntarily, that benefit the community?	Please list the social actions or projects sponsored or engaged in	<input type="text"/>	
1.3.9	Does the company, when contracting people, ensure diversity is valued, and does it object to adopting discriminatory practices as per race, gender, age group, nationality, sexual orientation, physical deficiency, religion etc.?	Please state the means of hiring personnel and existing restrictions	<input type="text"/>	
1.3.10	Does the company, at its production facilities, have access ramps, furniture and sanitary facilities that are appropriate for people with special needs?	Please list the existing facilities at the company for people with special needs	<input type="text"/>	
1.3.11	Does the Company agree to Sign the "Declaration of Compliance with Ethical Principles and Cemig's Socio-Environmental Directives" as part of the contractual supply relationship?	State whether the company agrees or not. The document may be accessed at the following website: WWW.CEMIG.COM.BR / MENU PRINCIPAL / QUEM SOMOS - 02 / GOVERNANÇA CORPORATIVA / GERENCIAMENTO DE RISCOS / Conheça a declaração de princípios éticos e código de conduta profissional.	<input type="text"/>	

1.4 - LEGAL REQUIREMENTS

ITEM REQUIREMENT

EVIDENCE REQUESTED

OBSERVATIONS

1.4.1	Does the company have a person responsible for technical matters?	Certificate of Good Standing, Registration proof, for individuals or legal persons, from CREA or ART (Technical Responsibility Annotation) when the professional is not a direct employee of the company.	<input type="text"/>	
1.4.2	Does the company have an Environmental Operation License (LO), Preliminary License (LP) or Installation License (LI) for the industrial unit, valid and issued by the competent environmental authority (at a federal, state or municipal level) in conformity with the legislation in force?	Please state the type of license, number, date and issuing body	<input type="text"/>	
1.4.3	Does the company have, if it meets the conditions established in NR-4, a SESMT (Specialized Occupational Safety and Medicine Engineering Service)?	Please state the composition of the SESMT and date of registration with the M.T.E. - Ministry of Labor and Employment or request for registration	<input type="text"/>	
1.4.4	Does the company have, if it meets the conditions established in NR-5, a CIPA (Internal Accident Prevention Commission), constituted and registered with the M.T.E. - Ministry of Labor and Employment?	Please state the current composition of the CIPA and dates of the election and induction	<input type="text"/>	
1.4.5	Has the company implemented a PCMSO (Occupational Medical Health Control Program), in accordance with NR-7?	Please state the date, name of the doctor responsible and their CRM (Federal Council of Medicine) number	<input type="text"/>	
1.4.6	Does the company have a PPRA (Environmental Risk Prevention Program), in accordance with NR-9?	Please state the date, name of the safety technician or engineer and their professional registration No.	<input type="text"/>	
1.4.7	Does the company train and capacitate its employees that interact directly or indirectly with electrical facilities and services involving electricity, in accordance with NR-10?	Please state the number of employees who have received safety training for facilities and services involving electricity and their positions in the company.	<input type="text"/>	
1.4.8	Does the company declare that it does not employ minors under the age of 18 in night shifts or hazardous or unsafe work, or minors under the age of 16 in any capacity (except under the condition of minor-apprentice, defined in decree No. 5598 of December 01/2005), in compliance with the pertinent legislation, in accordance with section XXXIII of article 7 of the federal constitution and decrees No. 3597 of September 12/2000, No. 4134 of February 15/2002 and No. 4681 of June	Declaration on company letterhead, dated and signed by the company's legal representative	<input type="text"/>	

1.4.9	Does the company declare that it does not engage in labor relations that characterize forced labor or are analogous to slave labor, in which employees are kept at their fabrication property/unit, deducting from their salaries amounts related to essential goods necessary to their survival (food, clothing, housing, etc.), complying with the pertinent legislation, in conformity with laws No. 9.777 of December 30/1998, No. 10803 of December 11/2003 and complementary law No. 75/83?	Declaration on company letterhead, dated and signed by the company's legal representative	<input type="text"/>	
1.4.10	Does the company, if it has more than 100 employees, employ among its workforce people that have benefitted from rehabilitation or people with special needs, properly trained, in the proportions established in law No. 8213, article 93, of July 24/1991?	No. of employees rehabilitated or with special needs hired in relation to the total number of employees at the company.	<input type="text"/>	
1.4.11	Does the company, if it collects raw water, have a water use grant and is it up to date with the payment of the related fees?	Grant No. and expiry date	<input type="text"/>	
1.4.12	Does the company, if it discharges effluents, have a treatment plant, license to discharge effluents and is it up to date with the payment of the related fees?	License No. and expiry date	<input type="text"/>	

