

HENDRINA POWER STATION (TENDER RETURNABLE)  
 ENVIRONMENTAL PROCEDURE/POLICY NO'S HSPP1024 AND HSPP1005  
**Environmental Requirements for Tenders/Quotes**

Enquiry No: .....

Suppliers/Contractor to ensure that they comply with all environmental legislations and other  
 Environmental requirement.

Which Product/s are you tendering/quoting on or planning to use that may have an environmental impact?  
 Describe

Tender/ Quote No: .....

1. Business registration	Mark With "X"			
What is the nature of your business?	Manufacturing	<input type="checkbox"/>	Construction	<input type="checkbox"/>
	Maintenance	<input type="checkbox"/>	Other	<input type="checkbox"/>
	Supply	<input type="checkbox"/>		
	Service	<input type="checkbox"/>		
	If "Other" Describe .....			
2. Packaging				
What type of packaging do you use for your product?	Plastic	<input type="checkbox"/>	Steel	<input type="checkbox"/>
	Wood	<input type="checkbox"/>	Other	<input type="checkbox"/>
	Cardboard Box	<input type="checkbox"/>		
	Polystyrene	<input type="checkbox"/>		
	If "Other" Describe .....			
3. Transportation				
What type of transportation do you use for your product?	Tanker	<input type="checkbox"/>	Railway	<input type="checkbox"/>
	Tractor	<input type="checkbox"/>	Bike	<input type="checkbox"/>
	Truck	<input type="checkbox"/>	Other	<input type="checkbox"/>
	LDV	<input type="checkbox"/>		
	If "Other" Describe .....			

4. Legal requirements				
Which Environmental Legislation and other Environmental requirements are applicable to your activities	National Environmental Management Act	<input type="checkbox"/>		
	Environmental Conservation Act	<input type="checkbox"/>		
	National Water Act	<input type="checkbox"/>		
	Hazardous Substances Act	<input type="checkbox"/>		
	Other	<input type="checkbox"/>		
	If "Other" Describe .....			
5. Material Safety Data Sheets (MSDS)				
Do you have Material Safety Data (MSDS) available for your products?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If "No" Describe .....				
Is the MSDS in a 16 point form?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If "No" Describe .....				
How is compliance meet?	Describe .....			
6. Environmental Impacts				
6(a) What are the potential	Describe .....			

Rating

1

2

3

If no knowledge of any law is displayed or there is no answer or N/A is put=1

If knowledge on one law =2

If knowledge of three environmental laws=3( any applicable law to project)

No rating as this is material based.

Rating

Environmental Impacts that could arise from your activities/products?		1	2	3
		If the company doesn't know of any impact( said No,N/A or the score is empty = 1)	If the only know impacts but no control=2	If the company has indicate that they are aware of the impacts. And have indicated what the control measures are=3
6(b)What control measures are in place to mitigate the impacts?	Describe .....	1	2	3
		If no controls are available to be implemented in the case of an emergency=1	If there is 1 control available =2	If more then 2 controls are available =3
<b>7. Environmental Emergency</b>				
What are the potential Environmental Emergencies that could arise from your activities (from manufacturing, transportation and use of the product etc)?	Describe .....	No rating as this is for information only		
What measures are in place to deal with the emergencies?	Describe .....			

<b>8. Environmental Management</b>		Rating		
Do you have an Environmental Management System in place?	Yes <input type="checkbox"/> No <input type="checkbox"/>	1	2	3
	If "Yes" Describe ..... If "No" Describe .....	If there are not elements of the ISO standard=1	If the company can produce an Env Policy =2	If there is an EMS=3 Aspect register with significant aspects
<b>9. Environmental Training</b>		Rating		
What type of Environmental Training has been conducted?	General Environmental Awareness <input type="checkbox"/> Oil Spillages <input type="checkbox"/> Environmental Law <input type="checkbox"/> Other <input type="checkbox"/> If "Other" Describe ..... To Whom? .....	1	2	3
		Zero or N/A on the training interventions = 1	1 env training intervention= 2	if 2 env training interventions =3
<b>10. Pollution Prevention</b>		Rating		
Have your Company initiated a program for the following:	Recycling Yes <input type="checkbox"/> No <input type="checkbox"/> Pollution Prevention Yes <input type="checkbox"/> No <input type="checkbox"/> Reduction in resource consumption Yes <input type="checkbox"/> No <input type="checkbox"/> Use of environmentally friendly products Yes <input type="checkbox"/> No <input type="checkbox"/> Describe .....	1	2	3
		If no programmes have been initiated or N/A is placed=1	If any 2 programmes =2	Any three programmes=3

Total

Name of Company: \_\_\_\_\_  
 Compiled by: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

Accepted by the Employer/Purchaser:  
 Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_

**Signature:**

**Date:**

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