	ADMIN MANUAL	Document No: ADM - 004	Revision No.: 0
	Supplier Accreditation and Performance Evaluation Policy	Effectivity Date: Jan 1, 2016	Page No. 1

I. Objective

This manual is intended to guide the Administration Unit on the selection, accreditation and performance evaluation of suppliers

II. Scope

The manual shall cover the criteria, required documents for accreditation, the accreditation process and performance evaluation of all suppliers


III. Documents

1. Supplier Accreditation Form
2. Company Profile
3. Copy of supplier's business license / permit for the year
4. Copy of Certificate of Registration with the BIR
5. Copy of BIT Certificate as accredited printer for OR
6. Registration of Business Name with DTI Sole Proprietorship
7. Articles of Incorporation and By-Laws from the SEC
8. Audited Financial Statement for the last 2 years
9. List of Goods and Services and Price List
10. List of Clients
11. Performance Evaluation Report

IV. Supplier Accreditation

A. Policies

1. The Administration Unit shall continuously search for supplier with the intention of procuring quality products and services and establishing long term business relationships
2. The selection of suppliers is the responsibility of the Purchasing Unit. In making the selection, the Purchasing Unit may consider the following criteria:
 - a. Supplier should have enough resources to ensure timely delivery and high quality of after sales service
 - b. Supplier should meet the following standards: Quality of product or service, technical competence, competitive pricing, delivery timeframe, customer service and term of credit
 - c. Supplier should submit the necessary documents for accreditation
 - d. Supplier should not be an employee or relative of TSPI or member of the BOT (unless endorsed through a Board Resolution).
3. The supplier accreditation shall be valid and renewable in two years unless formally withdrawn or revoked by TSPI due to contract violation.
4. Exceptions to supplier accreditation are limited to the following:
 - a. Emergency purchases – acquisitions requiring immediate delivery in which the time frame is shorter than the prescribed lead time.

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- b. If the materials and services requested are not available in any of the suppliers on the list of accredited suppliers
- c. If a supplier has exclusive dealership of the item / service being procured
5. All Suppliers Accreditation and the exemptions from the policy will require the approval of the CEO


B. Procedures

1. Admin Supervisor shall receive the documents and prepare the list of suppliers per classification and forward it to the Admin manager for review.
2. Admin Manager shall receive the list of suppliers including the required documents for review.
3. Admin Manager shall review the documents and prepare a recommendation of the selected supplier and forward it to the Head of Finance and Accounting for approval.
4. Head of Finance and Accounting shall receive the recommendation from the Admin Manager and affix his signature for approval
5. After the approval, Admin Manager shall inform the accredited suppliers and shall discuss the terms and conditions as stated in the policy,

V. Performance Evaluation

A. Policies

1. Suppliers shall be subjected to periodic Performance Evaluation to update supplier classification to monitor and assess supplier's performance and compliance to the company's standards and to improve key processes of supplier that may be related to the company's operations.
2. Supplier's performance shall be evaluated based on the following criteria:
 - a. Timeliness of delivery based on the Receiving Report and condition of the product at the time of delivery.
 - b. Price – competitiveness, fair, provides cost reduction options.
 - c. Quality – provides products that meet the company's quality requirements, low percentage of defective / rejected products.
 - d. Delivery – delivers the correct quantity at the right time, flexibility in changes of response and resolution, schedules, provides updates on progress or problems.
 - e. Service – value-added services, timely response and resolution, and willingness to share information.
 - f. Credit Terms – number of days allowed for payment.
3. Exceptions to performance evaluations are limited to the suppliers with less than five transactions in a calendar year.
4. Supplier's Performance Evaluations require the approval of the Head of Finance and Accounting.
5. The results of the Performance Evaluation / Supplier classification covering a 6-month period (at a minimum) shall be reported to the Head of Finance and Accounting at the end of the calendar year.

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B. Procedures

1. Admin Supervisor shall prepare the following:
 - a. List of Suppliers to be evaluated for the period
 - b. Narrative report to summarize the status and performance of each supplier.
 - c. Request the accredited suppliers to update the list of goods and services and the latest price list.
 - d. Fill up the Performance Evaluation Form and forward it to the Admin manager for review.
2. Admin Manager shall receive the Performance Evaluation Form for review
3. Admin Manager shall summarize the results of evaluation and forward it to the Head of Finance and Accounting for approval.
4. Upon approval, Admin Manager shall advise the supplier of the results of the periodic Performance Evaluation.

REVISION HISTORY

<u>Date Issued</u>	<u>Sponsor(s)</u>	<u>Series</u>	<u>Brief Description of Proposal</u>
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SUPPLIER ACCREDITATION FORM

Instruction: Please accomplish this form and submit together with the required accreditation documents to:

Administration Unit
TSPI MBI
3RD Floor TSPI Bldg
2363 Antipolo St.
Guadalupe Nuevo Makati City 1212

Company name: _____	
Previous Business Name (if applicable): _____	
Date of Name Change: _____	
Complete Address (Office) _____	Contact No: _____ Email Address: _____ Website: _____
Complete Address (Warehouse / Plant) _____	Contact No: _____ Email Address: _____ Website: _____
ORGANIZATIONAL DATA	
Type of Business Organization (Please Check)	
Corporation _____ Partnership _____ Single Proprietorship _____ Others (please specify) _____	
If Corporation answer the following:	
Date of Incorporation: _____ Place of Incorporation: _____	
President's Name: _____	
Vice President's Name: _____	
Secretary's Name: _____	
Treasurer's Name: _____	
If partnership answer the following:	
Date of Organization: _____	
Name and Address of General Partners:	
1. _____	
2. _____	

3. _____
4. _____
5. _____

If Single Proprietorship, describe your organization and Name of Principals:

PRODUCT / SERVICE DATA

Nature of Business (Please Check)

Manufacturing _____ Trading _____ Service Contractor _____ Others (please specify) _____

Product Lines

Brand and Principal Manufacturer

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |

Services Offered:

1. _____
2. _____
3. _____
4. _____
5. _____

CUSTOMER / CLIENT DATA

	Name of customer	Address	Contact Person / Tel No.
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

BANK INFORMATION

	Name of Bank	Address	Contact Person / Tel No.
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

ACCREDITATION DOCUMENTS SUBMITTED (Original Documents presented for authentication)

1. Supplier Accreditation Form
2. Company Profile
3. Copy of supplier's business license / permit for the year
4. Copy of Certificate of Registration with the BIR
5. Copy of BIT Certificate as accredited printer for OR
6. Registration of Business Name with DTI Sole Proprietorship
7. Articles of Incorporation and By-Laws from the SEC
8. Audited Financial Statement for the last 2 years
9. List of Goods and Services and Price List
10. List of Clients

I certify that the above information are true, complete and correct. I understand that any misrepresentation or material omission made herein or in any other document requested by TSPI MBI renders this accreditation null and void.

Signature over Printed Name

Position

Date



SUPPLIER'S EVALUATION FORM

Business Name of Supplier: _____

Office Address: _____

Remarks: _____

Date of site Visit (if necessary): _____

- a. _____ Verified quality of products / services. Called up contact persons of clients listed
- b. _____ Verified three major suppliers
- c. _____ Verified trade references / bank references

_____ Recommended to be TSPi MBI _____ supplier / _____ contractor

_____ Not recommended

Recommended for Approval:

Admin Supervisor / D

Admin Manager / Date

Approved by:

Head – Accounting and Finance / Date

ACCREDITED SUPPLIER'S PERFORMANCE EVALUATION FORM

Supplier		Date			
Product / Service		Prepared by			
Address					
	Excellent(4)	Good (3)	Fair (2)	Poor (1)	Comments
Service					
Delivers on time					
Condition of products on arrival					
Follows instructions					
No of reject / back job					
Handling of complaints					
Technical assistance					
Furnishes specially requested information					
Delivers without constant follow-ups					
Keeps promises					
Past reliability record					
Technical ability for difficult work					
Personal preferences					
Others: _____					
Overall rating be MITS					
Overall rating by Purchasing					

Evaluated by:

Noted by:

Admin manager / Date

Head – Accounting and Finance / Date