



**South African Airways (Proprietary) Limited
(Reg. No. 1997/022444/07)
Johannesburg International Airport
Republic of South Africa**

**BEE QUESTIONNAIRE
FOR**

.....
(COMPANY NAME)

ANNEXURE B: SUPPLIER EVALUATION INPUT SHEET

Section A: Business Profile

Please complete or tick where applicable

Business Type:

- Sole Trader
- Joint Venture
- Close Corporation
- Company (Private/Public)

Business Registration Number:

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VAT Number:

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**TAX CLEARANCE CERTIFICATE:
ATTACHED**

YES	NO
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Postal Address: _____

Physical Address: _____

Contact Person: _____

Designation: _____

Tel: _____

Cell: _____

Fax: _____

E-mail: _____

Nature of Business _____

Types of products/services provided _____

Section B: Black Economic Empowerment

The following questions relate to:

- a) The form of your business enterprise,
- b) Its ownership,
- c) Its executive management control,
- d) The black economic empowerment initiatives that your business engages in, such as purchasing from previously disadvantaged groups, sub-contracting to previously disadvantaged groups and human resources development, and corporate social responsibility.

1. OWNERSHIP

(Please complete section A or B)

A SINGLE ENTITY (Sole Trader, Close Corporation, Company)

1.1 Is there equity ownership by Blacks?

Yes	No

1.1.1 If yes, who are the Black equity owners?

Name	Name

1.1.2 What percentage equity ownership do Blacks hold?

1.1.3 What percentage equity do black women hold?

(Provide list)

Name	Name

1.1.4 What percentage equity do disabled persons hold?

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(Provide list)

Name	Name

1.1.5 Who holds the remaining percentage equity in the business?

(Provide all co. registration documents, shareholders certificates, shareholding agreements if applicable)

Name	Name

1.2 Are you part of any group or holding company?

Yes	No

1.2.1 If yes, please include the organization structure, indicating the percentage shareholding.

B JOINT VENTURE (Alternative to 1.A)

1 Will the project be undertaken on a joint venture basis with Black business? Please include JV Agreement

Yes	No

1.1 If yes, who are the Black partners?

Name	Name

1.2 What percentage equity or profit is involved between the joint venture partners?

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1.3 What percentage equity ownership do black women have?

(Provide list)

Name	Name

1.4 What percentage equity ownership do disabled people have?

(Provide list)

Name	Name

2 MANAGEMENT

2.1 To what extent are Blacks involved at executive management level?

(Provide a detailed organogram)

2.2 Extent of involvement at board level?

(Provide complete list of Board members)

2.3 What is the percentage of Black board members with voting rights?

3 PURCHASES FROM BLACK BUSINESS

3.1 Do you purchase any of your products from Black businesses?

Yes	No

3.2 If yes, what is the BEE spend as a % of the overall Procurement spend?

(Provide list of Black suppliers and contact numbers, type of products/services and % black shareholding)

3.3. Indicate the Firm's total procurement spend on all suppliers for the past twelve months

4 ENTERPRISE DEVELOPMENT

4.1 Will you sub-contract or outsource any of your requirements to Black businesses?

Yes	No

4.2 Will this initiative (sub-contracting) be related to this bid/project?

Yes	No

4.3 If yes, provide the scope, percentage of project and estimated Rand value of work to be sub-contracted.

4.4. Investment If any, in black owned and empowerment enterprises as a portion of total assets.

5 HUMAN RESOURCES DEVELOPMENT

5.1 What % of your training budget is targeted for black employees?

	%
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5.2 Do you have an Employee Equity Plan in terms of the Act?

(Provide EE Plan, current profile and EE Report)

Yes	No

Demographic Profile

Occupational Levels	Male				Female				TOTAL
	African	Coloured	Indian	White	African	Coloured	Indian	White	
Top Management									
Senior Management									
Middle/Supervisory Management									
Skilled Technical									
Semi-Skilled									
Unskilled-defined decision-making									
TOTAL									

5.3 Do you have advancement programmes in place for your black employees?

Yes	No

5.4 If yes, please provide details of all programmes, workplace skills plan and report.

6. 6.1 Is there a social responsibility programme in place?

(If yes, provide details of projects concluded, spend, location or place and beneficiaries)

Yes	No

6.2 Do you have any disabled persons in your workforce?

Yes	No

6.3 If yes, what percentage are they of total workforce?

	%
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6.3 State the number of employees in your company.

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6.4 What is your business's annual turnover?

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I hereby declare the information provided, is the best to my knowledge true and correct.

For and on behalf of the company

Date

Capacity of signatory (Position held in Company)