



PT. ISPAT INDO

Plant: Desa Kedungturi, Taman Sidoarjo.P.O.Box 1083, Surabaya Indonesia.

Telp : (62)-31-788-7000.Fax : (62) 31-788-7500/ (62) 31-787-7575

Email : PURCHASE.INDO@mittalsteel.com

- PUR/ R/ 01 -

Vendor Profile Form

| | Purchase Dept | | Legal | Technical Dept | | Finance Dept | |
|-------------------------|-----------------------|----------------|----------------|----------------------|----------------|--|----------------|
| | | Ranking 1-5 | Ranking 1-5 | | Ranking 1-5 | | Ranking 1-5 |
| Departmental Evaluation | Nature of Criticality | 2 | 2 | Technical Competancy | | Financial Turn over & Financial Strength | 2 |
| | Purchase Strategy | 2 | | | | | |
| Signature | | | | | | | |

| Details | | | |
|--|---|--|------|
| Vendor Visit, Market Feedback, Trial Order Result, Test Report, Potential Items to supply in Future, Advantage : | | | |
| | | | |
| Purchaser Name | Tarsina I11 | | |
| Company Code | INDO | Purchase Organization | INDO |
| ACC. GROUP | Z003 | Domestic - Spares & Consumable | |
| Vendor Schema : | <input checked="" type="checkbox"/> LP (Local Purchase) <input type="checkbox"/> IP (Import Purchase) <input type="checkbox"/> SL (Scrap Local) | | |
| PAYMENT ACCOUNT & METHODS | | | |
| RECON.ACCOUNT | 5210000002 | Domestic-Spares&Cons | |
| PAY TERMS METHODS | | Credit 30 days After Receipt | |
| A.OUTGOING | | * Pls don't fill anything for OUTGOING | |
| B.INCOMING | | Letter of Credit | |
| WITHOLDING TAX TYPE | | Pasal 4 (2) | |
| CURRENCY | IDR | | |
| INCOTERMS | FRANCO | FRANCO | |
| LOCATION | INDO | | |
| <input type="checkbox"/> Approved Vendor: Vendor Code: _____ | | | |
| <input checked="" type="checkbox"/> New Vendor PT. ARROW ASIA INDONESIA | | | |

| CFO Approval | |
|--------------------|--|
| Remarks | |
| Signature and Date | |

| New Vendor entered in computer system by | |
|--|--|
| Name | |
| Date & Signature | |

Ranking Criteria:

- 1 Poor
- 2 Good
- 3 Verry Good
- 4 Excellent
- 5 Exceptional

Entry data Verified



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Vendor Profile Form

| | | | | |
|--|---|-----------------------------|--|--------------------------|
| 1. | Title & Name of the Vendor | | PT | ARROW ASIA INDONESIA |
| 2. | Address & Street (Domicile) | | Komplek Perumahan Tritan Point Blok C 39 | |
| | City & Postal Code | | Jl. Raya Ketajen, Gedangan | |
| | District | | Sidoarjo | |
| | Country | | ID | INDONESIA |
| | Business language & currency | | Bahasa | IDR |
| | Telephone | | 031-8014760 / 031-99005917 | |
| | Fax | | 031-8014760 | |
| | e-mail | | wahyu@arrowasiagroup.com / fuchs.marketing@arrowasiagroup.com | |
| | Website | | | |
| 3. | Contact person | | | |
| | Name | Wahyu Kurnianto | | |
| | Position | Sales Manager | | |
| | Telp | 031-8014761 | | |
| | Fax | 031-8014760 | | |
| | Hand Phone | 81330106797 | | |
| | Email | wahyu@arrowasiagroup.com | | |
| 4. | Legal Documents of Indonesian Company (attached) | | No | Valid until |
| | Notary deed / akte pendirian | | 39 | |
| | SIUP / Surat Ijin Usaha Perdagangan | | 12218-03/PK/1.824.271 | 28-Nov-18 |
| | TDP / Tanda Daftar Perusahaan | | 09.02.1.46.47970 | 2-Des-2018 |
| | Legalization from DEPKUMHAM (special for PT) | | AHU-60809.AH.01.02 Tahun 2013 | |
| | SIUJK (special permit for Civil Construction) | | | |
| | SIO from DISNAKER (special permit for Manpower Supply) | | | |
| | Insurance JAMSOSTEK registered (special for inhouse job) | | | |
| | Wajib Lapor Tenaga Kerja (special permit for Manpower Supply) | | | |
| 5. | Vendor's Banker (Must be Fill complete) | | | |
| | Name of bank | BANK RAKYAT INDONESIA (BRI) | | |
| | A/C No. | 0356-01-000591-301 | | |
| | Bank Branch & Address | Kemayon - Jakarta | | |
| | Name in cheque | PT. ARROW ASIA INDONESIA | | |
| | SWIFT Code | | | |
| | IBAN | | | |
| 6. | Taxation | | | |
| | NPWP / Tax Number | 02.121.284.0-035.000 | Name: | PT. ARROW ASIA INDONESIA |
| | PKP No. | 02.121.284.0-035.000 | Name: | PT. ARROW ASIA INDONESIA |
| 7. | Other Details | | | |
| | Total annual turnover (\$): (pls enclose balance sheet) | for last 3 years | Year 1 | |
| | | | Year 2 | |
| | | | Year 3 | |
| | Year of commencement | | | |
| | Nature of business | | Manufacturer / Authourised Dealer / Trader (Please enclose government permission registration details) | |
| | Pattern of business holding | | Proprietorship / Partnership / Public Ltd (please attach copy of registration) | |
| | Name of the parent company | | | |
| | Name of the principal company | | PT. FUCH | |
| | Have you ever been in business with Ispat Indo (If yes - detail year of interaction and purpose) | | | |
| Declarations | | | | |
| We hereby declare that information above is correct and true to best of our knowledge. | | | | |
| | Signature | | | (Company Seal) |
| | Name | LUTFIA RINWINDITA | | |
| | Date | 12/4/2018 | | |

Note : Please fill all the field with details. Form with blank field will not be considered for registration.