

Plant: Desa Kedungturi, Taman Sidoarjo.PO.Box 1083, Surabaya Indonesia. Telp: (62)-31-788-7000.Fax: (62) 31-788-7500/ (62) 31-787-7575

Email: PURCHASE.INDO@mittalsteel.com

Vendor Profile Form

1.	Tittle & Name of the Vendo	or	K METAL C	O LTD					
		··	l l						
2.	Address &		#503 SHINYOUNG BL	DG., JANGCHARO 9, G	GOCHONEUP				
	Street (Domicile)								
	City & Postal Code		GIMPO CITY		10126				
	District		GYUNGGIDO						
	Country		SOUTH KO						
	Business language & currer	ncy	ENGLISH	USD					
	Telephone		+82-31-9874928						
	Fax		+82-070-8650-4928						
	e-mail		sam@s-kmetal.co.kr						
	Website		Under construction						
3.	Contact person								
	Name	SAM KWON							
	Position	DIRECTOR							
	Telp	+82-10-3741-4929							
	Fax								
	Hand Phone	+82-10-3741-4929							
	Email	fufu0605@naver.com							
4.	Legal Documents of Indor	esian Company (att	ached)	No	Valid until				
	Notary deed / akte pendiriar		•						
	SIUP /Surat Ijin Usaha Perd								
	TDP /Tanda Daftar Perusah								
	Legalization from DEPKUM								
	SIUJK (special permit for Ci								
	SIO from DISNAKER (speci		er Sunnly)						
	Insurance JAMSOSTEK reg		117/						
Ļ			pecial permit for Manpower Supply)						
5.	Vendor's Banker (Must be		E LODEA						
	Name of bank	INDUSTRIAL BANK O							
	A/C No.	988-004246-56-00018							
	Bank Branch & Address	MAGOKBALSANYEOK BRANCH / 2ND FLOOR, GONGHANGDAERO 261, GANGSEOGU, KOREA							
	Name in cheque	:							
	SWIFT Code	IBKOKRSE							
_		:							
6.	Taxation	200.00	2 22 15 2	N KAETA					
	NPWP / Tax Number	826-86	6-00459	Name: K METAL CO., LTD.					
	PKP No.			Name:					
7.	Other Details								
	T () () ()		Year 1 2017 : USD7.3 MILLION AROUND						
	Total annual turnover (\$):	for last 3 years	Year 2 2016 USD4	ar 2 2016 : USD5.1 MILLION AROUND					
	(pls enclose balance sheet)		Year 3 N/A						
			Teal S IV/A						
	Year of commencement								
	Nature of business		Trader (Please enclose government permission registration details)						
	Pattern of business holding								
			Properietorship						
	Name of the parent compan	у	N/A						
	Name of the principal compa	any	N/A						
	Have you ever been in busin	ness with Ispat Indo							
	(If yes - detail year of interaction								
De	clarations								
We	hereby declare that inform	ation above is corre	ct and true to best o	f our knowledge.					
Sigi	nature				K METAL CO., LTD.				
Nan		SAM KWON			$\sqrt{}$				
Date		07/02/2018							
					Director Sam Kwon				

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



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8.											
T	8. List your top five customers in order of businees volume Name, location of the customer Annual busines, \$ % of your total business										
а	KOE	REA SHIPPING CORP					% of your total business 41%				
a b	KOR	HYUNDAI STEEL		USD 3 MILLION AROUND USD1.3 MILLION AROUND			18%				
С		KISWEL : KO		USD1.1 MILLION AROUND			15%				
d		SEAH BESTEEL		USD0.9MILLION AROUND			12%				
e		NATSTEEL : SIN		USD0.8MILLION AROUND			11%				
	Detai			te the deta	ils and Pls	enclose the pr	oduct catalogues if any)				
10	PRODUCT LIST IS ATTACHED. D. Organisation stucture of your company (pls enclose a copy)										
10.	Orga	insation stucture or y	our company (pis en	1	Skilled	Unskilled	Total				
	Number of employees		Mgmt								
	. ,		1	1		2					
11.	Name	e of key persons in yo	ours organisation &	contact d	etails						
	No. Name		Phone No.			Email					
ŀ	1	SAM KWON		+82-10-3741-4929			SAM@S-KMETAL.CO.KR				
12	Quali	 itv System Accreditati	0. OHSAS	0. OHSAS, etc) (If yes, pls enclose details)							
		ty System	N/A	-,	., , (11)00	., p.o 0.101000 u	,				
Г	Agen		N/A								
- 1		•	N/A								
		received		for the n	raduata an	4					
-	Inspection & testing facilities and procedures for the products and services offered (pls enclose details) N/A										
Į.	Customer complaint handling process (pls enclose details) N/A										
14.	Custo	omer complaint hand	ling process (pls enc	lose details							
15.	Detai (Plea	ils of your associates se enclose authorisat	/ authorised dealers tion letter)	s / service	N/A	deal with IS	PAT INDO				
15.	Detai (Pleas Busir	ils of your associates se enclose authorisa ness with Ispat Group ou supplying to any c	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / /	s / service	N/A e centers to	deal with IS	PAT INDO				
15.	Detai (Pleas Busir	ils of your associates se enclose authorisa ness with Ispat Group	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / /	s / service	N/A e centers to	deal with IS	PAT INDO				
15. 16.	Detai (Pleas Busir	ils of your associates se enclose authorisa ness with Ispat Group ou supplying to any c	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / /	s / service	N/A e centers to		PAT INDO				
15.	Detai (Pleas Busir Are y	ils of your associates se enclose authorisat ness with Ispat Group you supplying to any co s, pls include which unit an	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / And items supplied)	s / service	N/A e centers to						
15. 16.	Detai (Pleas Busin Are y (If yes	ils of your associates se enclose authorisat ness with Ispat Group ou supplying to any o s, pls include which unit an Unit	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / And items supplied) Year	s / service ts Arcelor M	N/A e centers to	lter	ns supplied				
16.	Detai (Pleas Busin Are y (If yes	ils of your associates se enclose authorisat ness with Ispat Group ou supplying to any o s, pls include which unit an Unit	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / And items supplied) Year	s / service ts Arcelor M	N/A e centers to	lter					
16.	Detai (Pleas Busin Are y (If yes No	ils of your associates se enclose authorisat ness with Ispat Group ou supplying to any o s, pls include which unit an Unit	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / And items supplied) Year	s / service ts Arcelor M	N/A e centers to	lter	ns supplied				
15. 16.	Detai (Pleas Busin Are y (If yes No Relat	ness with Ispat Group ou supplying to any ou plying to an	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / / d items supplied) Year SPAT / Employee / Ex	ts Arcelor M	N/A e centers to	Iter	ns supplied of the person and relationship				
15.	Detai (Plea: Busin Are y (If yes No Relat N/A	ils of your associates se enclose authorisations se enclose authorisations with Ispat Group ou supplying to any course out supplying to any course out supplying to any course output supplying the supplying to any course output supplying the supplying to any course output supplying the supplying to any course output supplying the supplying to any course output supplying to any course output supplying the suppl	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / / d items supplied) Year SPAT / Employee / Ex	ts Arcelor M	N/A e centers to	Iter	ns supplied of the person and relationship				
15.	Detai (Pleas Busin Are y (If yes No Relat N/A	ils of your associates se enclose authorisations se enclose authorisations with Ispat Group ou supplying to any course out supplying to any course out supplying to any course output supplying the supplying to any course output supplying the supplying to any course output supplying the supplying to any course output supplying the supplying to any course output supplying to any course output supplying the suppl	/ authorised dealers tion letter) o / Arcelor Mittal Uni other Ispat Group / / d items supplied) Year SPAT / Employee / Ex	ts Arcelor M	N/A e centers to	Iter	ns supplied of the person and relationship				

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	Purchase Dept		Legal	Technical Dept		Finance Dept				
		Ranking 1-5	Ranking 1-5		Ranking 1-5		Ranking 1-5			
Departmental Evaluation	Nature of Criticality Purchase Strategy	1-5	1-5	Technical Competancy	1-5	Financial Turn over & Financial	1-5			
	, , , , , , , , , , , , , , , , , , , ,			, ,		Strength				
Signature										
			Details							
Vendor Visit, Market Feedl	oack, Trial Order Res	ult, Test Re	eport, Potent	tial Items to s	upply in F	-uture, Advai	ntage :			
Purchaser Name	MURNI		1			1				
Company Code	INDO		Purchase C	Organization		INDO				
ACC. GROUP	Z004	Import – S	Spares and Co							
Vendor Schema :	LP (Local Purchase)		IP (Import Pu	urchase)		SL (Scra	ap Local)			
PAYMENT ACCOUNT & N	METHODS									
RECON.ACCOUNT	5210000003		Import-Spares&Consumables							
PAY TERMS METHODS	Z014	Document Through Bank, 100% at s				ight				
A.OUTGOING	CDCOB	* Pls don't fill anything for OUTGOING								
B.INCOMING	L	Letter of C	Credit							
WITHOLDING TAX TYPE		WHT at Payment								
CURRENCY	USD									
INCOTERMS	CIF	COSTS, I	NSURANCE							
LOCATION										
☐ Approved Vendor		٧	endor Code:							
New Vendor	■ New Vendor									
CFO Approval										
Remarks										
Signature and Date										
New Vendor entered in computer system by							Ranking Criteria:			
Name						1	Poor			
Date & Signature						3	Good Verry Good Excellent			
L	ļ					1	Exceptional			

Entry data Verified