

PT. ISPAT BUKIT BAJA

Plant : Jin.Perjuangan NO.26 RT. 002 RW. 09, MARGAMULYA - BEKASI UTARA, JAWA BARAT, 17142, Indonesia

Telp: (62)-21-884-0519.Fax: (62) 21-884-1333 Email: info@ispatbukit.com

Vendor Profile Form

1.	Tittle & Name of the Vendor		PT. YASA TRANS SAMUDERA						
2.	Address &		Jl. Kebon Bawang 1 No. 37						
-	Street (Domicile)		Tanjung Priok, Jakarta Utara						
	City & Postal Code		Jakarta Utara 14320						
ı	District		DKI JAKARTA						
1	Country		ID INDONESIA						
l l	Business language & currer	ncv	Indonesia Rupiah						
1	Telephone	icy	021-43935233						
1	Fax		021-40300200						
1	e-mail		exim.transtrijaya@gmail.com; marketing@ttscorp.co.id						
1	Website		exim.transtrijaya@gmaii.com ; marketing@ttscorp.co.td						
-			1						
3.									
l	Name	SUBAGIO				The Edward Wes			
	Position	Direktur							
	Telp	021-43935233							
	Fax								
	Hand Phone	0811-1882-125	1-1882-125						
	Email	subagio@ttscorp.co.io							
4.	Legal Documents of Indo	nesian Company (att	ached)	No		Valid until			
	Notary deed / akte pendiria			01		7117			
	SIUP /Surat Ijin Usaha Perd			171/N.15.1/31.72/-1	819 6/2018				
	TDP /Tanda Daftar Perusah			2411220130					
	Legalization from DEPKUM			AHU-66016.AH.01.01					
	SIUJK (special permit for C			AHU-00016.AH.U1.U1	1.1anun 2013				
			O						
1	SIO from DISNAKER (spec								
1	Insurance JAMSOSTEK reg			19000000063	1962				
_	Wajib Lapor Tenaga Kerja		npower Supply)						
5.	Vendor's Banker (Must be	e Fill complete)							
	Name of bank : BANK CENTRAL ASIA (BCA)								
	A/C No.								
	Bank Branch & Address	: Yos Sudarso							
1	Name in cheque	: PT. YASA TRANS S	AMUDERA						
	SWIFT Code	: CENAIDJA		C. F. P. L. C. C.					
	IBAN								
6.	Taxation								
	NPWP / Tax Number	66.647.022.4-042.000		Name: PT. Yasa Trans Samudera					
	PKP No.	O OCODICDAND LOANS		Name of Variation of Variation					
		S-250PKP/WPJ.21/KP	2.0303/2022	Name: PT. Yasa Trans	s Samudera				
7.	Other Details								
	T		Year 1						
		Total annual turnover (\$): for last 3 years (pls enclose balance sheet)							
	(pis enclose balance sheet)								
1			Year 3						
	Year of commencement								
			Manufacturer / Authourised Dealer / Trader (Please enclose government permission registration details)						
1	Nature of business								
	Pattern of business holding		portrious in agricultural details)						
	rauern or business noiding		Properietorship / Pa	rtnership / Public Ltd (ple	ease attach conv	of registration			
	Name of the parent compan	V	Properietorship / Partnership / Public Ltd (please attach copy of registration						
1	Name of the principal compa								
	Have you ever been in busin								
	(If yes - detail year of interaction								
Do	the state of the s	n and purpose)							
	clarations					-			
Wel	hereby declare that inform	ation above is correc	ct and true to best o	f our knowledge.		K			
Sign	nature	SIP				Carrielle			
		1/5							
Nam					COTTON OF THE	View and			
Date	20/02/2024				(Comp	pany Seaf)			

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



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8.	LIST	your top five custome	rs in order of busine	es volume	9							
		Name, location of t	,		es, \$	% of your total business						
a												
b				-			-					
C	-			 								
d				-								
9.	Deta	ils of products / service	ces offered (Must not	e the detail	s and Dis one	lose the prod	luct catal	onues if any)				
Э.	Details of products / services offered (Must note the details and PIs enclose the product catalogues if any)											
10.	Organisation stucture of your company (pls enclose a copy)											
	Number of employees		Mgmt	Skilled	Unskilled		Total					
11.	Name of key persons in yours organisation & contact details											
	No.	Name		Phone No.			Email					
12.	Quality System Accreditation (ISO 9000, 14000, OHSAS, etc) (If yes, pls enclose details)											
		Quality System										
	Agen											
40	_	received	<u></u>									
13.		ection & testing facilities offered (pls enclose		or the pro	ducts and							
	Servi	ces offered (pis enclose	e details)									
14.	Cust	omer complaint handl	ing process (pls enclo	se details)								
		ils of your associates		/ service	centers to d	eal with ISP	AT GROU	JP	(Please			
	enclo	se authorisation lette	r)									
16.	Busin	ness with Ispat Group	/ Arcelor Mittal Units	2								
10.		ou supplying to any o			tal Unite							
		, pls include which unit and		i ocioi iiii	tui Oilits							
1							ms supplie	a d				
1		31111	i			110	ins supplie	eu				
- 1												
	Relat	ionship with any of IS	PAT / Employee / Ex	-Employe	e (Please gi	ve details of	the pers	on and relationship				
1									1			
Do	clar	ations										
_												
vve	iereb	y declare that informa		t and true	to best of o	ur knowledg	je.	15				
Signature			THE					A	ontio			
Name		SUBAGIO							and Ex			
Date		20/02/2024						(Company Seal)				

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