MERCURY

YOUR VISION, OUR DUTY.

SAP ARIBA

Suppliers Guide

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What is SAP Ariba SLP (Supplier Lifecycle and Performance)?

Mercury uses the SAP Ariba "Supplier Lifecycle and Performance" (SLP) module to onboard our suppliers. Ariba improves our onboarding process and allows all suppliers to self-serve and maintain their data within the system. This way of working gives you control over your own data and reduces the possibility of errors.

Supplier types for onboarding:

- **Sub-Contractor:**
  For companies performing works on site.
- **Consultant:**
  For companies performing consultancy services for the project (whether on site or not).
- **Vendor:**
  For companies supplying materials to the project (without doing any work on site).
- **Service Provider:**
  For companies providing services to the project (e.g. cleaning services, catering, security…).
- **Labour Agency:**
  For companies providing temporary workers to the project.

What is Registration?

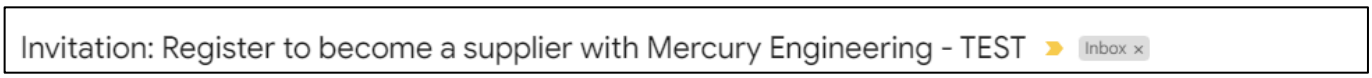
All new Mercury suppliers are required to register in SAP Ariba SLP with the ability to securely self-administer your own data.

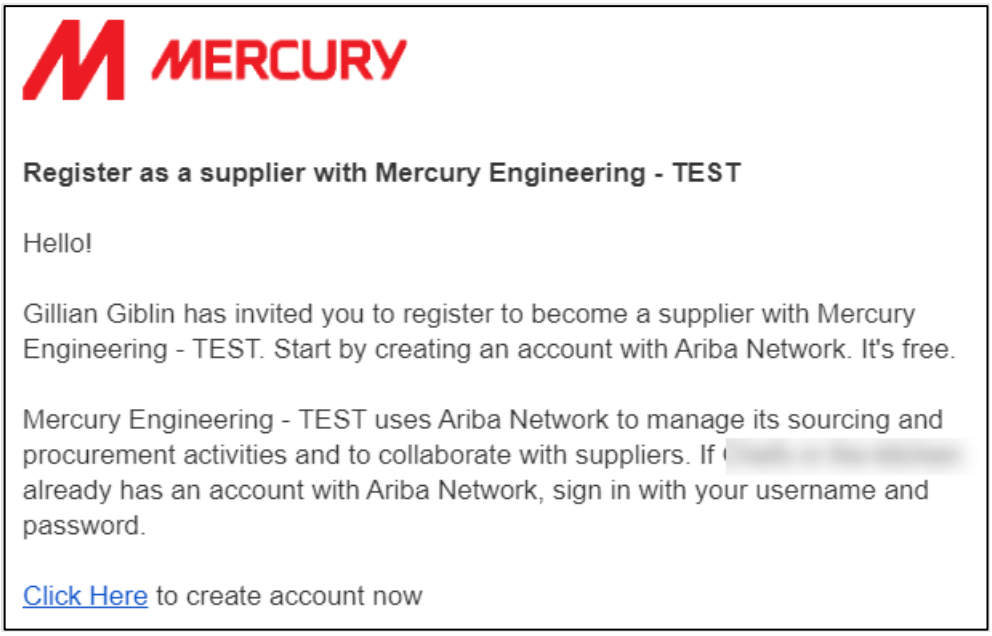
Registration is the process of creating your account.

Step 1: How to Register an Account?

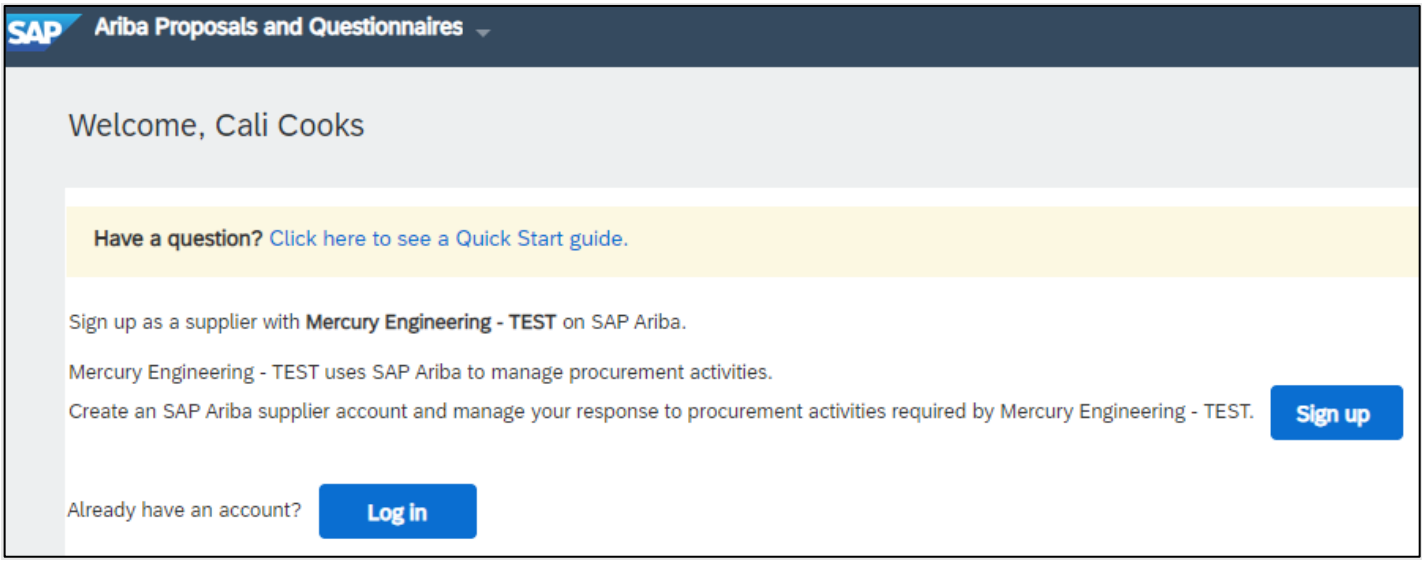
You will receive an email invitation from your Vendor Manager contact in Mercury.

Note the blue link in the email that says **Click Here**





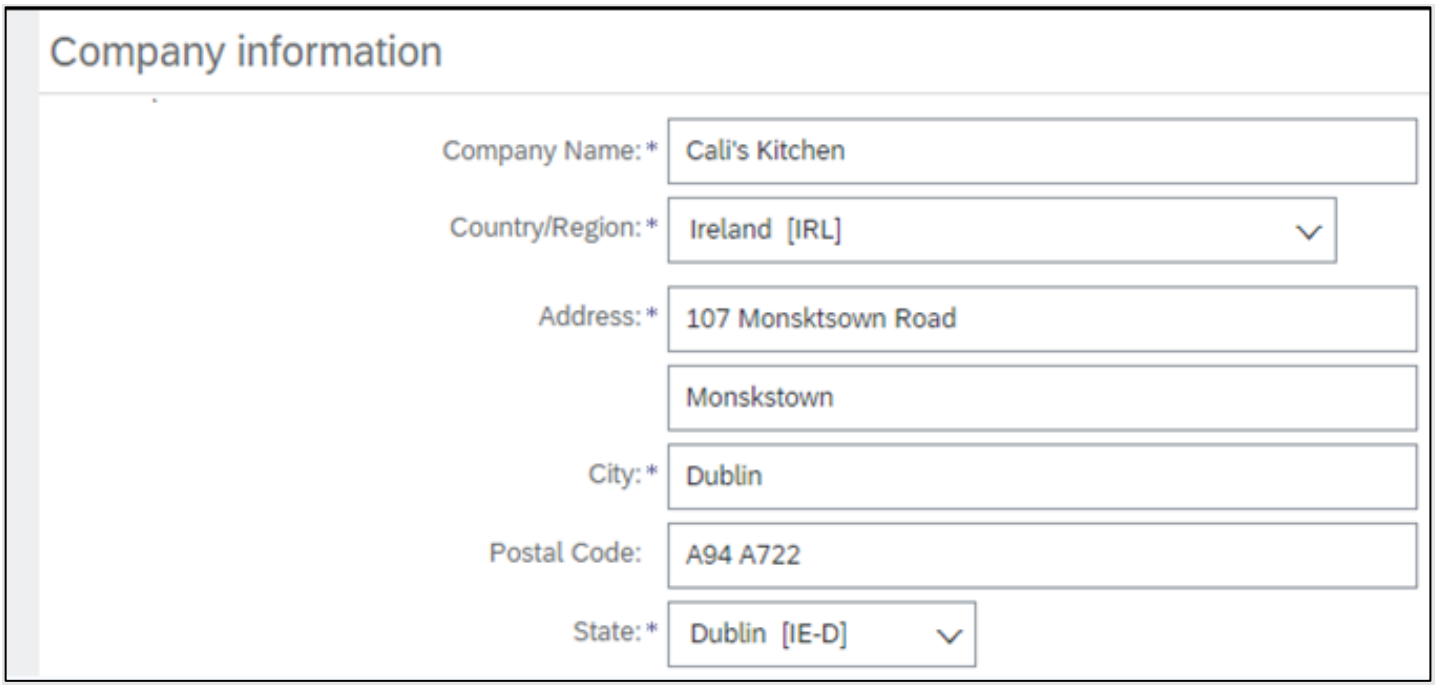
- When you click the link, the Ariba Registration/Login screen will open.



- Click **Sign up** to register an account.
- Click **Log in** if you already have an account. You may already be registered in Ariba with a different supplier. You can use the same log-in details if you wish. Make sure you follow our email link to the right webpage first.

Step 2: Complete the Registration Questions

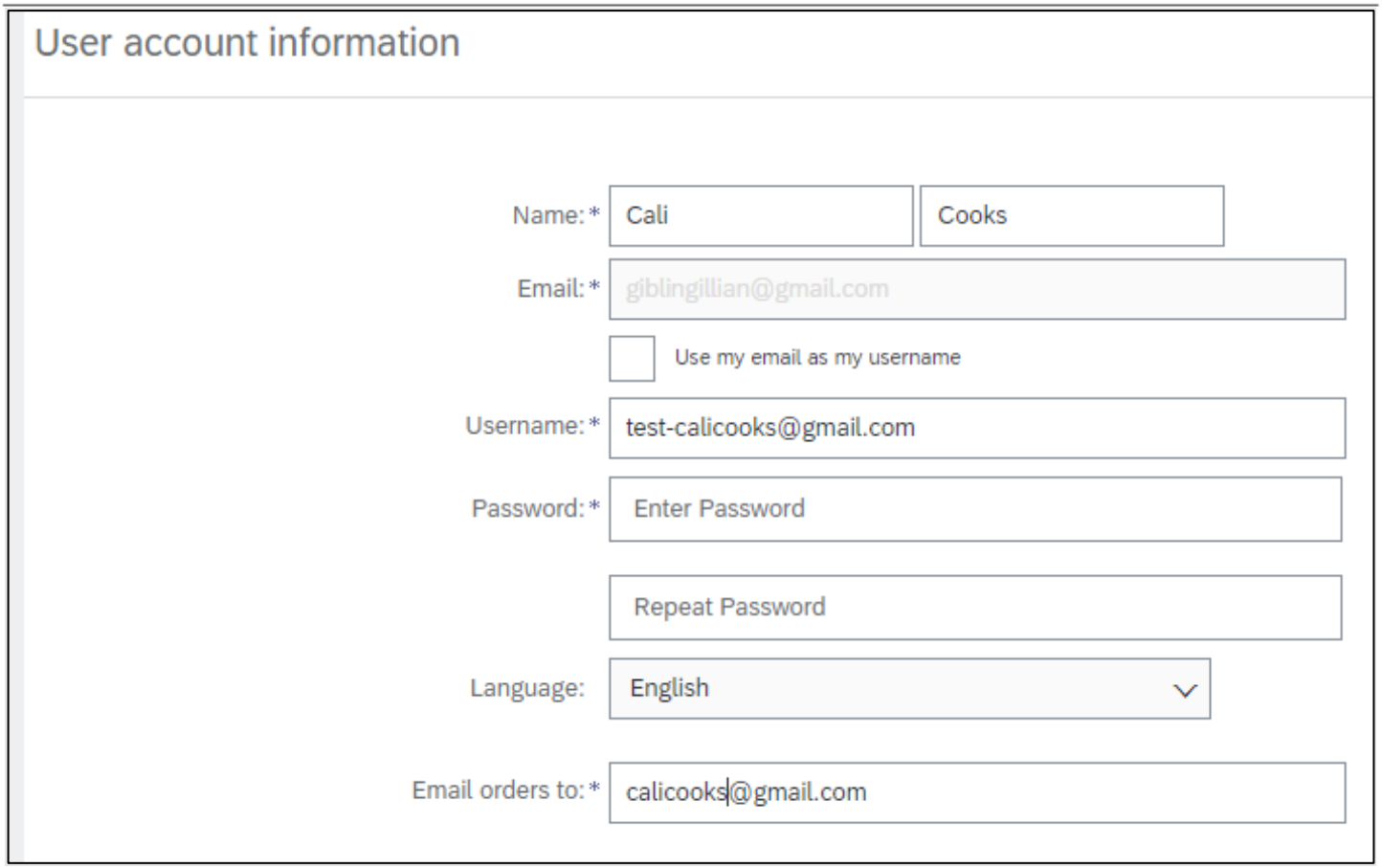
Complete the registration questions to create your account.



- Enter your **Company Name** and **Address**.

***Tip**: If you have more than one office, enter the main address. There will be a chance to include additional addresses at a later stage of the registration.*

Any fields with an * asterix are mandatory.



- Enter your **Name**, **Email** and new account **Password**.

Passwords must have a minimum of 8 characters, including upper and lowercase, a number and special character.

Top Tip:

Choose a generic email and password that can be shared with someone else in your company - if this complies with your IT security policies.

For example, admin@companyemail

- You can share the log-in details securely between departments to speed up the onboarding process across tax, finance and insurance.

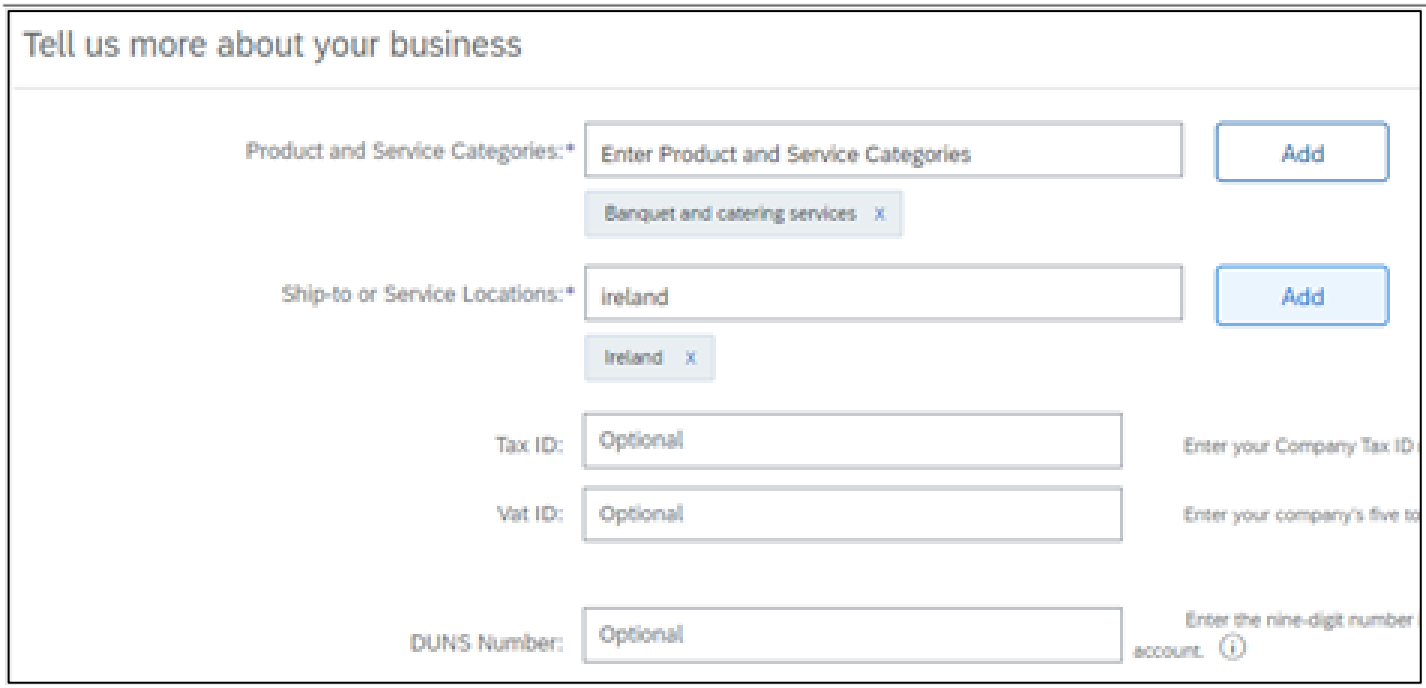
- If someone else in your company has already created an account – you should not create another to avoid duplicates.

- **Language**

Tip*: This selection ensures the language used when Ariba sends you notifications.*

Choose the language you want to receive updates in.

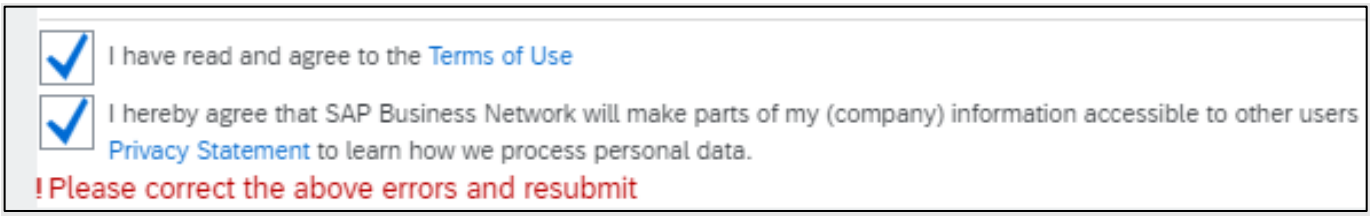
- *This is not the same as your choice of language in your web browser. You can change your Google settings to translate for you. Language*



- Click **Add** to search for a **Category**.

Tip*:* These are based on UNSPSC (United Nations Standard Product and Service Codes). You can type a description and the system will begin a search or select **Browse** for available categories. If there is not an exact match, select one that best matches your business offerings.

- In the **Ship-to or Service Locations** field click **Add** to search for or type in the name of any countries you work in.
- **Tax ID** and **VAT ID** are not relevant to all suppliers. Input these details if your company is registered.
- **DUNS Number** (Data Universal Numbering System)
  is also an optional field because it is not relevant to everyone. If this is relevant for your company, please include.



- Tick the checkboxes.
- Click **Create account and continue**.

If you miss any mandatory information, you will see the red text opposite

! Please correct the above errors and resubmit.

Based on the information you have provided; the system will ensure that you are not creating a duplicate account (as there can only be one Ariba account per legal entity). You will be warned of potential conflicts and given the chance to **Review accounts.**

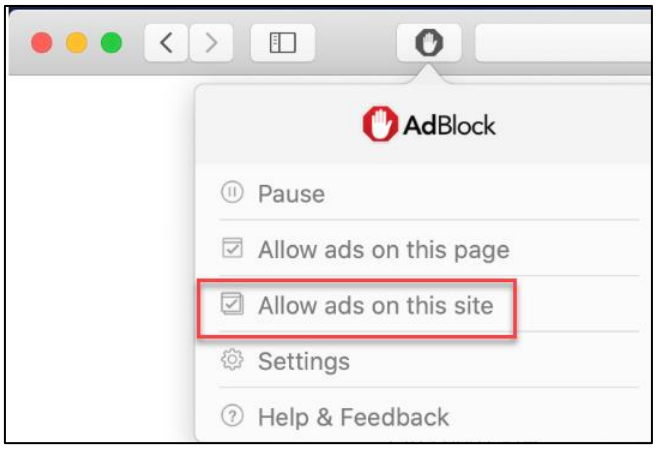
Potential conflicts – duplicate account or AdBlock issue

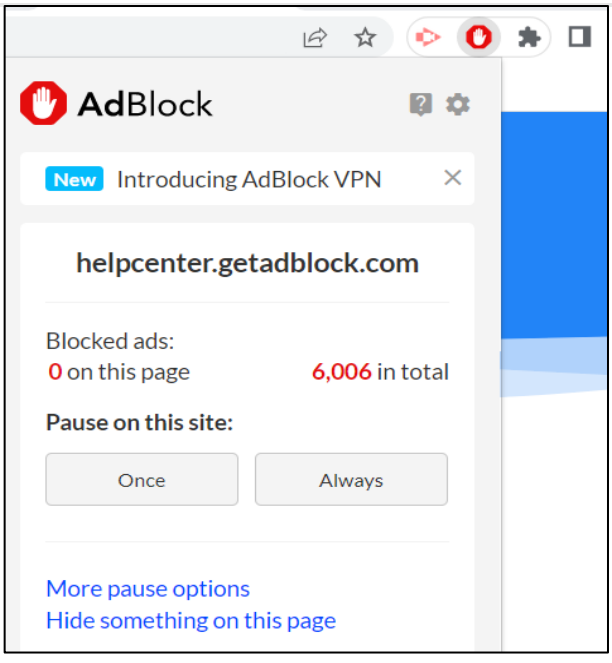
- Upon review, if you are happy that there is no duplication then click **Continue Account Creation**
- If this is a duplicate account, then you should contact your company's account administrator to have you added as a user to that account. Click here for more information
- The recommended internet browser to use for SAP Business Network is Chrome.
- In case you must use Safari, make sure you follow the instructions about Adblocker in your browser. To overcome this, you will need to change the settings to "Allow ads on this site."

Allow Ads on the Ariba site in AdBlock

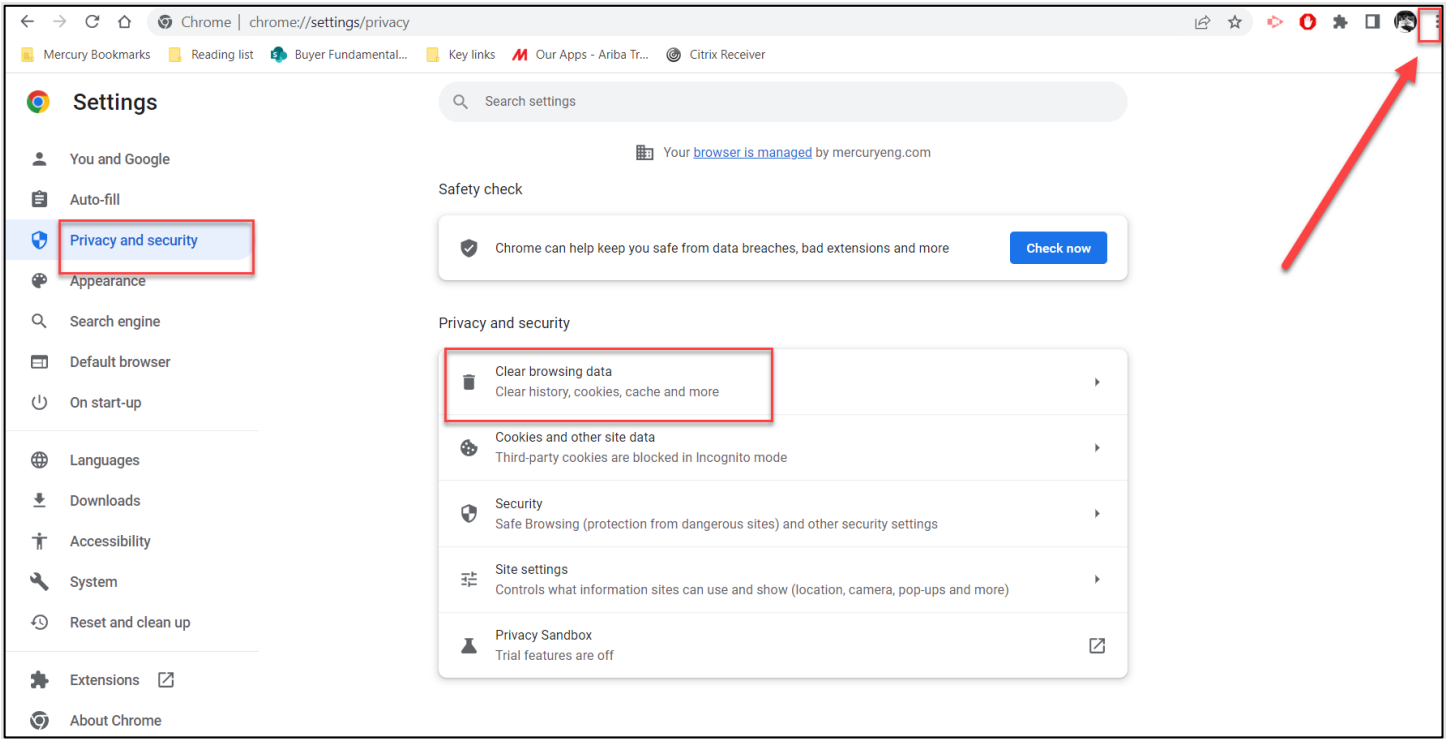
AdBlock is a fast and powerful ad blocking app that speeds up web browsing by removing ads and reducing loading times of web pages. AdBlock Safari is often found on MAC computers, but AdBlock is also used on Chrome, Firefox, and Edge.

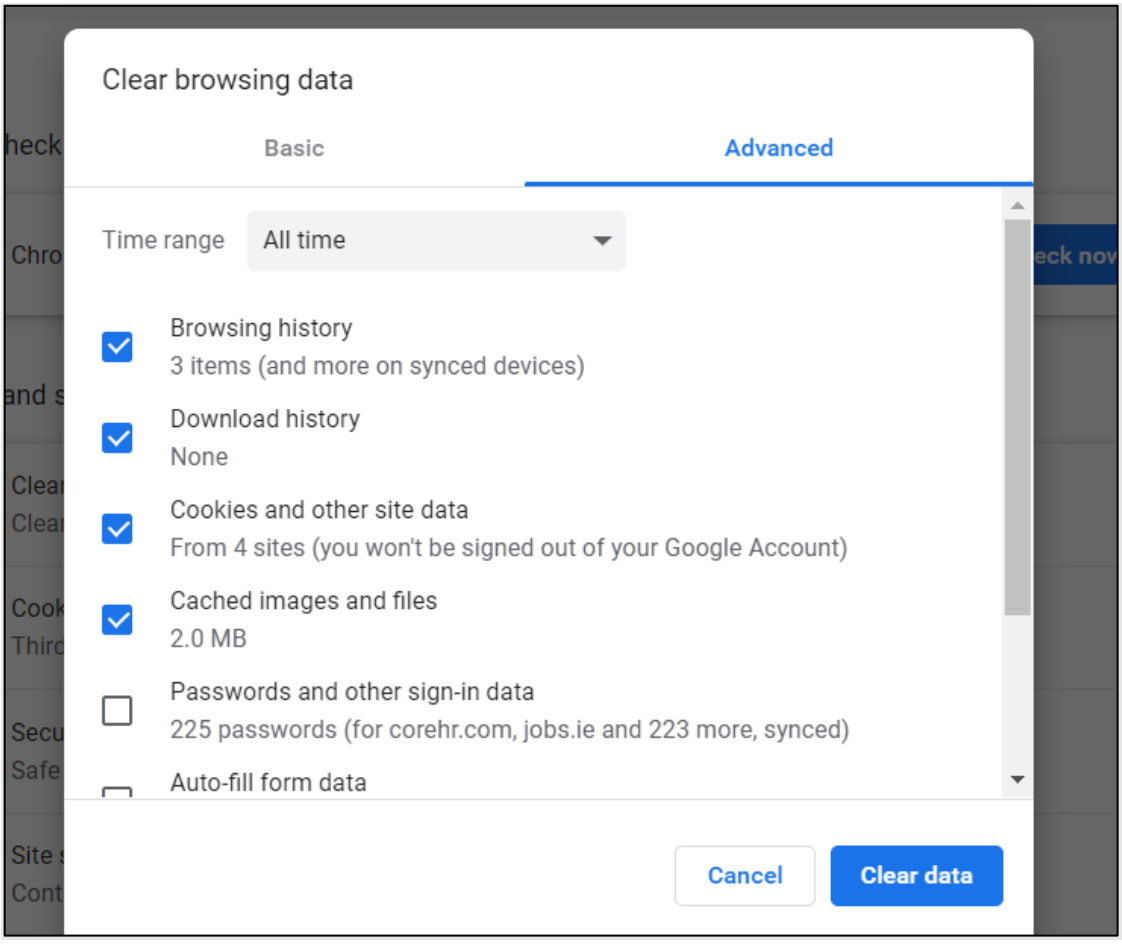
AdBlock blocks annoying ads on millions of websites however, it also disturbs the notifications and updates in Ariba. If you have AdBlock installed on your computer, it will be necessary to **Allow Ads on this Site** for Safari users and **Allow** for Chrome users.





Clear cache / browsing data if you have trouble logging in

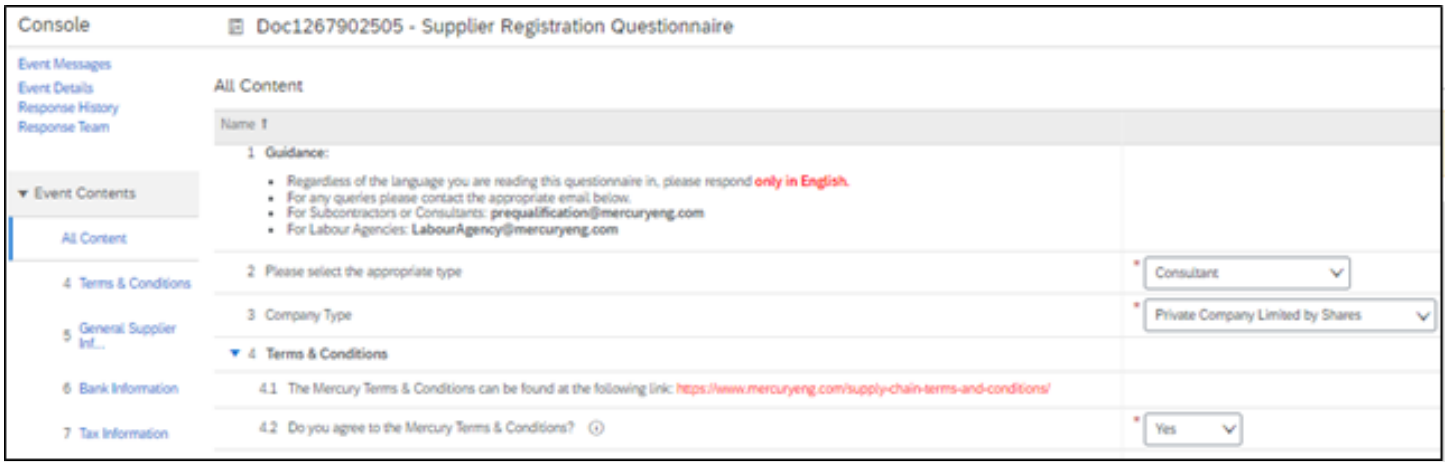




How to Complete the Registration Questionnaire

Some of the questions in this form will be answered based on the information you submitted. Review these are correct and complete the questions that have an * which means mandatory.

Where you see the blue links: Add Bank Information and Add Tax IDs, or Attach File, you need to click and complete extra questions and upload a document.



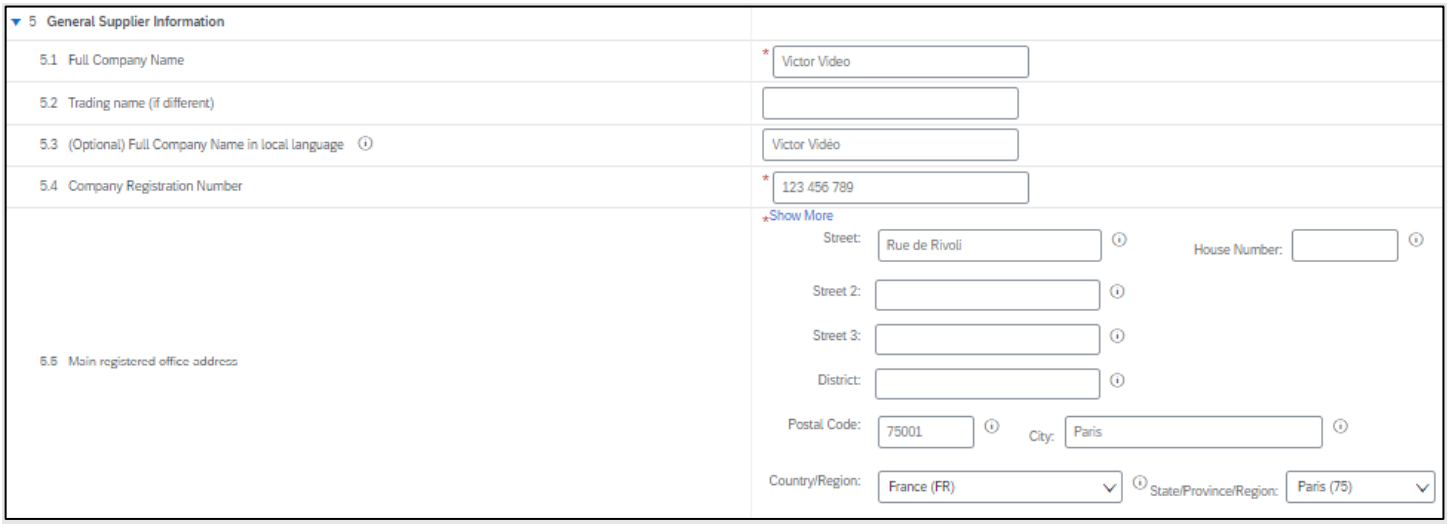
2. **Please select appropriate type**: vendor type already populated, is it correct?
3. **Company Type**: is this correct?

Terms & Conditions:

4. Click the link to review and answer Yes/No if you agree.

General Supplier Information:

5. Expand for additional questions.

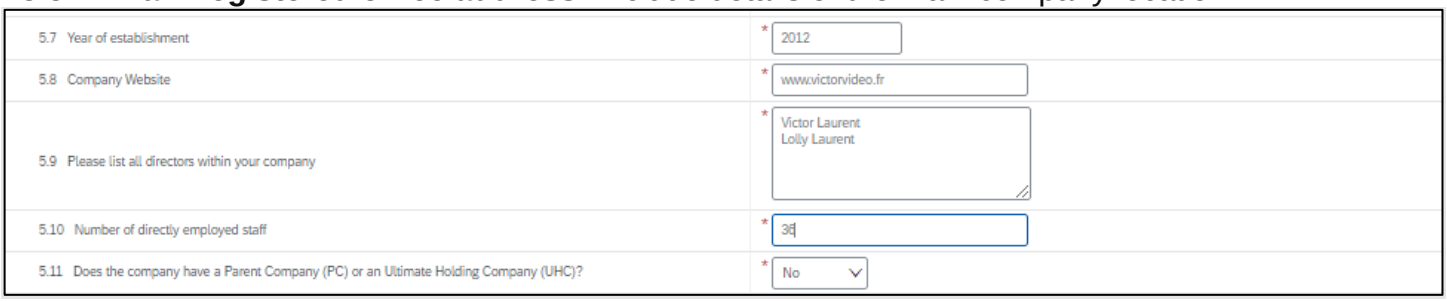


5.1. Full Company Name: type the full business name.
5.2. Trading name (if different) optional input if your trading name is different.
5.3. (Optional) Full Company name in local language

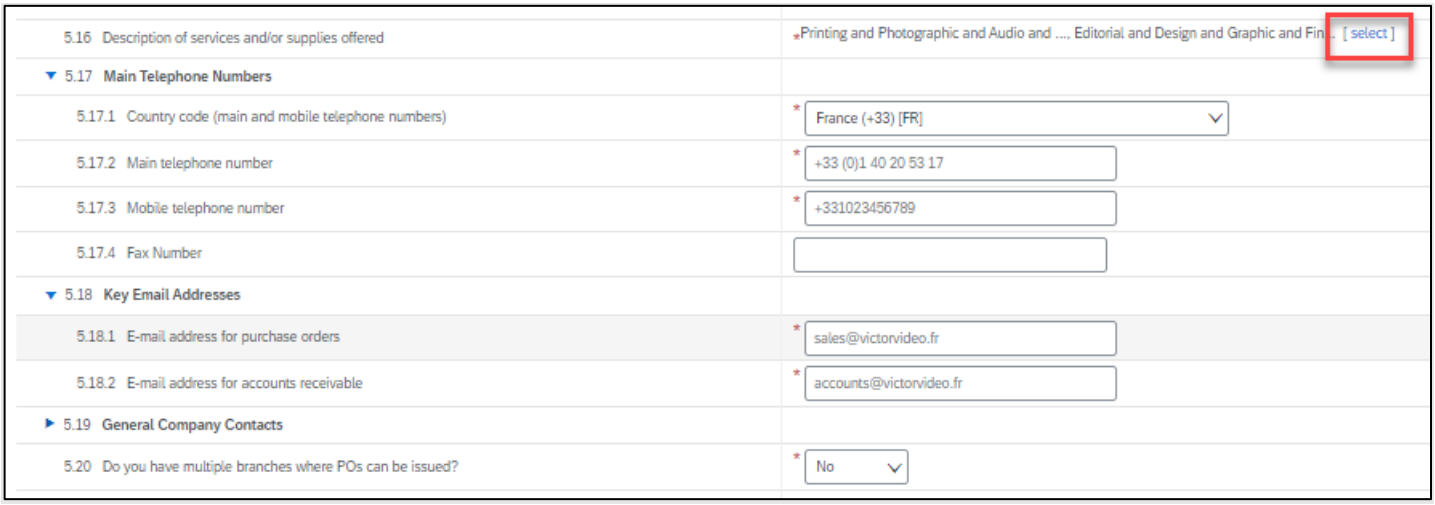
5.4. Company Registration Number: this is different in all countries and the list below is not exhaustive. Here are a couple of examples:

- France has the SIRET number (Système d'Identification du Répertoire des Établissements).
- Denmark has the CVR number (Central Business Register).
- Ireland has the CRO number (Company Registration Office).
- Spain has the CIF (Certificado de Identificación Fiscal).
- United Kingdom has the CRN (Company Registration Number).
- The NIP in Poland (Numer Identyfikacji Podatkowej)

5.5 Main registered office address: Include details of the main company location.



5.7 Year of establishment: what year was your company formed?
5.8 Company website
5.9 Please list all directors within your company
5.10 Number of directly employed staff: how many people are employed?
5.11 Does the company have a Parent Company (PC) or a Parent Holding Company (UHC): choose Yes or No.

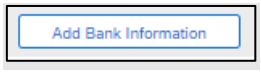


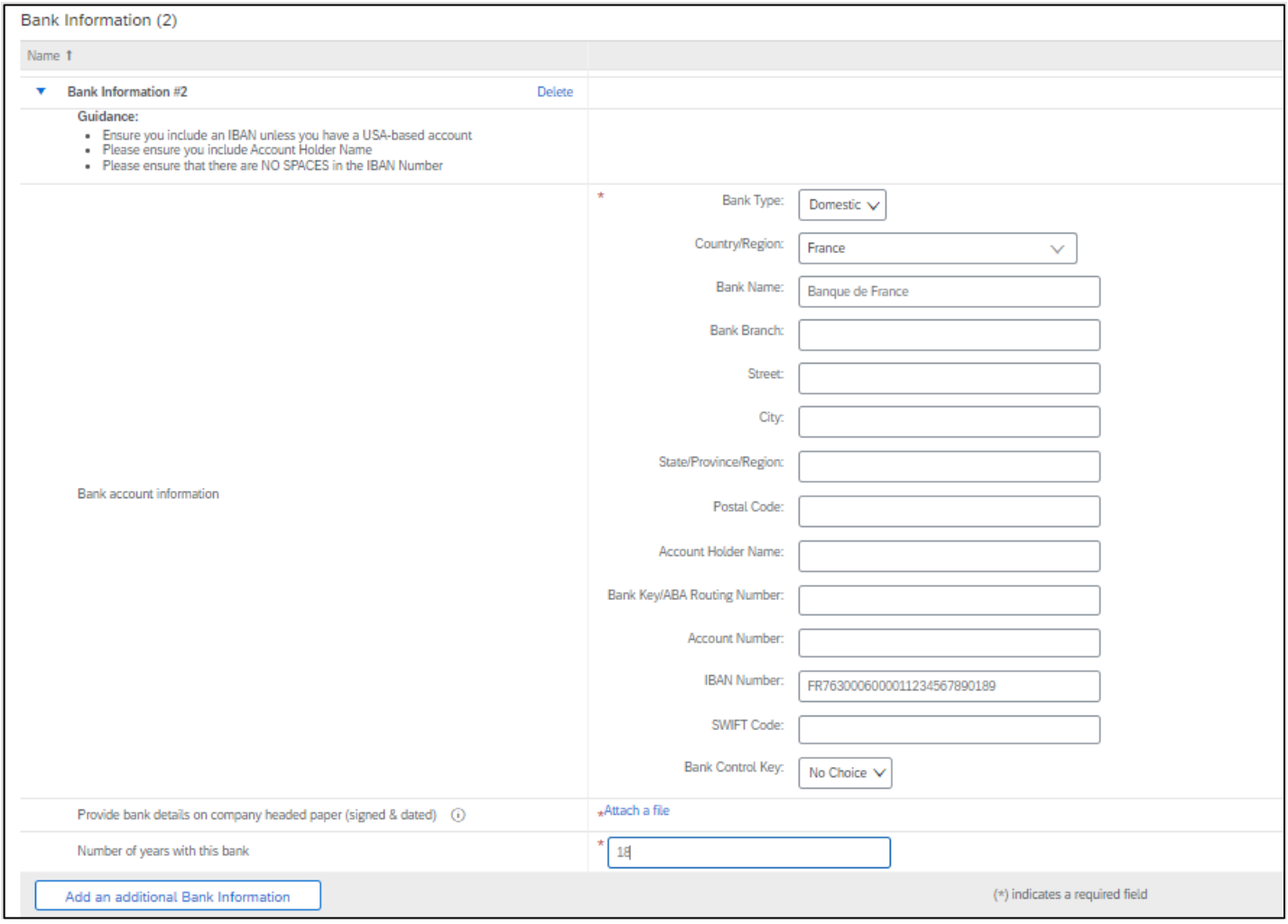
5.16. Description of services and/or supplies offered: click [select] to choose from a pre-defined list of options.

5.17. Main Telephone Numbers
5.18. Key Email Addresses: input the emails to receive purchase orders and accounts.
5.20. Do you have multiple branches where POs can be issued? choose Yes if you have more than one office which creates purchase orders, or No.

Bank Information

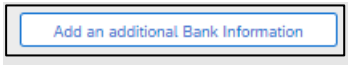
Click Add Bank Information.

Click  to expand the questions.



- **Bank Type:** choose Domestic or Foreign.
- **Country/Region:** choose the country your bank is located in.
- **Account holder Name:** what is the name on the account?
- **IBAN number:** if you do not use an IBAN number, ensure you include other banking details instead.
- **Provide bank details on company header paper:** click Attach File to upload a bank statement.
- **Number of years with this bank:** how many years have you been banking with this bank?

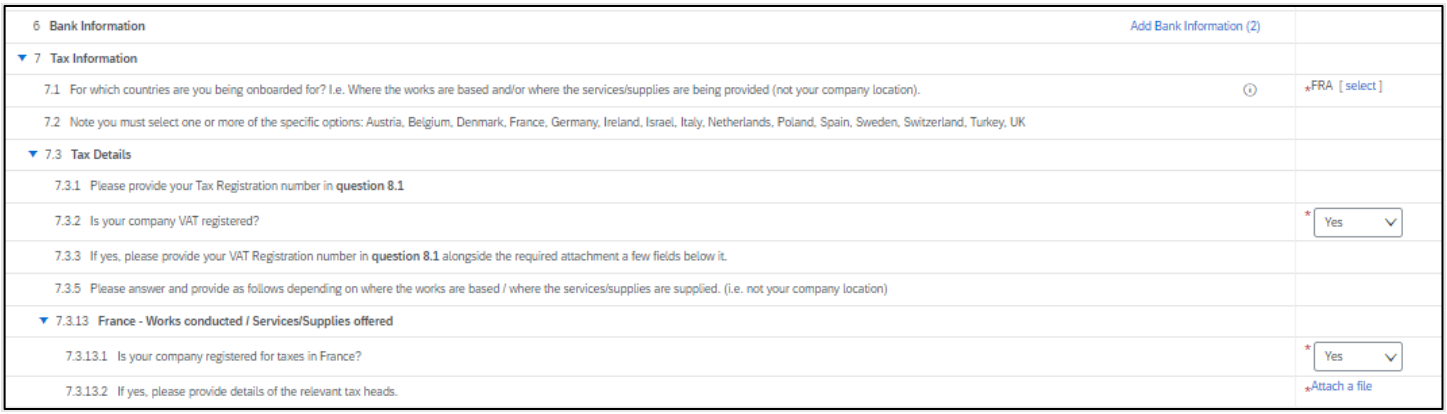
Click unless you have additional bank accounts to include.

To add more bank accounts for other countries, click 

Tax Information

The key fields to complete are:

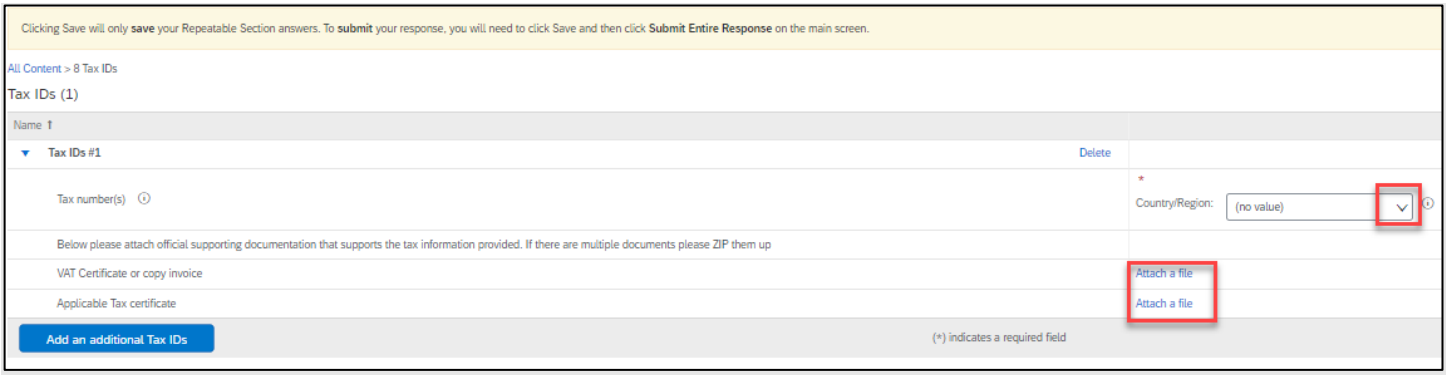
7.1. **For which countries are you being onboarded for?**
Click [select] to choose all the countries you are being onboarded to work in.



7.3.2. **Is your company VAT registered?** Yes or No.

7.3.13.1. **Is your company registered for taxes?** (In the country you registered with).

7.3.13.2. **If yes, please provide details of the relevant tax heads**. Click Attach a file to upload a tax document.

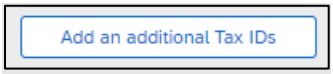


The Tax Information asked is slightly different in various countries (see the next page for examples).

- Choose your country.
- Input the Tax number.
- Attach the relevant certificates.

Click

unless you have additional bank accounts to include.

To add more Tax IDs for other countries, click 

Note: Ensure that you enter the number in the correct format for your country.
The VAT number is mandatory to onboard your account.

EXAMPLE - Ireland

EXAMPLE - France

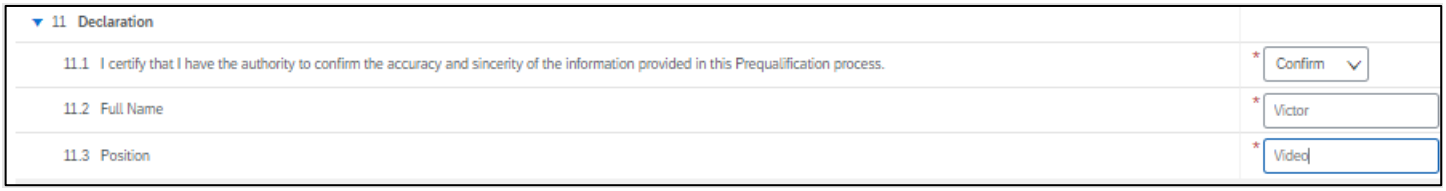
All other countries

If you work in another country the VAT registration number may have another name.

Invoicing

- **Purchase order Currency:** change if the default is incorrect.
- **Do you agree to Mercury payment terms of 60 days from end of month?** Choose Yes or No. If you choose No, you need to add an explanation for the term that was agreed.

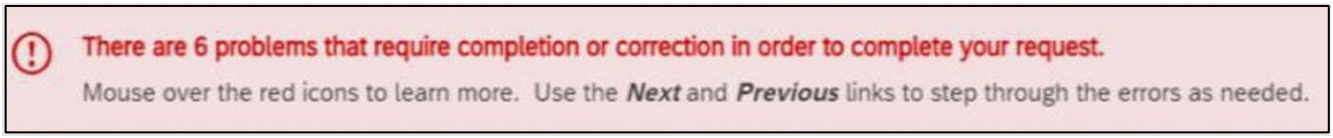
Declaration



- **I certify that I have the authority to confirm the accuracy and sincerity of the information in the Prequalification process:** Confirm.
- **Full Name**
- **Position**

- Click **Submit Entire Response** to complete.

You can use the other options to save as draft if not finished yet, create a message before you save or export to Excel.
If you miss any mandatory field a red notification will display at the top of the screen. Click Next and Previous to move between the issues.



I have registered my Ariba account, what next?

After you register your Ariba account, you will receive an email confirming your new account details. Your vendor manager will be notified by email to approve your account.

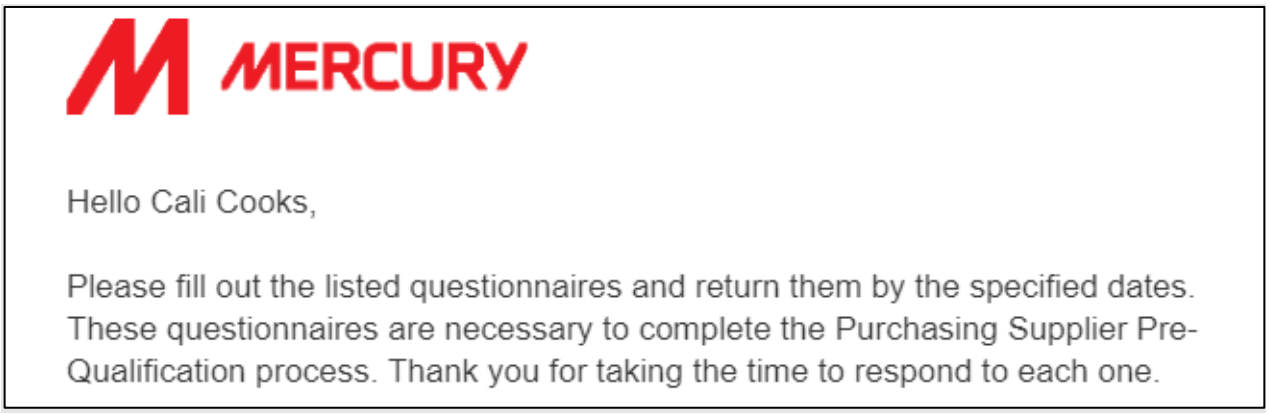
The vendor manager will review your details and may ask for further information if required. They will send you Pre-Qualification questionnaires to submit.

How to Complete the Pre-Qualification Questionnaires?

The Vendor Manager in Mercury who is looking after your application will send you a follow-up email containing relevant questionnaires which must be submitted.

The Pre-Qualification Questionnaires require information about your company details and policies. Please respond quickly to avoid delaying your account approval.

If the questionnaires are not relevant for your country or company, then select NO to the questions. We still need you to complete the answers to continue with onboarding your account.



Hello Cali Cooks,

Please fill out the listed questionnaires and return them by the specified dates. These questionnaires are necessary to complete the Purchasing Supplier Pre-Qualification process. Thank you for taking the time to respond to each one.

Note the **blue links** will take you to the Ariba login to complete the required Questionnaire details.

Important:

The Questionnaires you receive will be based on the type of vendor that you are.

Each vendor type will be explained in its own section.

Please read the section that fits your company vendor type:

1. General Vendor
2. Subcontractor
3. Consultant
4. Labour Agency

Pre-Qualification Checklist

Below is a list of all documents you will be asked for. If you do not have some of these policies or certificates, you can answer *No* to the question.

Some insurance is country specific and it may not be required.
See the *Terms and Conditions* for further explanation on Point #4 on the Registration questionnaire.

Documents	**General Vendor**	**Subcontractor**	**Consultant**	**Labour Agency**
Insurance				
Public or Product Liability Insurance (applicable to some countries. For example, UK and Ireland).	✓	✓	✓	✓
Employers Liability Insurance	✓	✓	✓	✓
Indemnity Insurance	✓	✓ Where required	✓ Mandatory	✓ Mandatory
General Liability Insurance (applicable to some countries. For example, Spain or France).	✓	✓	✓	✓
Contractors Plant + Equipment All Risks Insurance		✓	✓	
Motor Insurance Certificate		✓	✓	
Attestation = proof of ability to work in specified country	In some cases	In some cases	In some cases	In some cases
Quality				
Quality Management policy	✓			
ISO 45001 certificate	If you have	If you have	If you have	If you have
Quality plan		✓	✓	✓
Product / Material Certification		✓ Where required		

Documents	General Vendor	Subcontractor	Consultant	Labour Agency
Health, Safety, Environmental				
Health, Safety, Quality & Environmental Management Certificates		✓		
Environmental policy		✓	✓	
Health & Safety training matrix		✓		
Health & Safety policy	✓	✓	✓	✓
Safety Statement	✓	✓	✓	✓
Health & Safety prosecutions in the last 4 years		✓	✓	✓
Safety Incident Statistics in the last 4 years		✓	✓	✓
Sustainability				
CSR / ESG / Sustainability policy		If you have		
Modern Slavery policy		If you have		If you have
EcoVadis score		If you have		
Carbon reduction targets		If you have		
Waste report		If you have		
Finance				
Balance Sheet Income Statement Cash Flow- 3 years		✓ Mandatory		
Quality Assurance				
Quality Assurance manual	✓	✓	✓	✓
Quality Assurance policy	✓	✓	✓	✓
Support and Service policy	✓	✓	✓	✓
Drugs and alcohol policy	✓	✓	✓	✓

General Vendor Pre-Qualification Questionnaires

General vendors receive the following Questionnaires:

1. Supplier insurance Certificates
2. Quality Management
3. Support and Service

MERCURY

Hello Cali Cooks,

Please fill out the listed questionnaires and return them by the specified dates. These questionnaires are necessary to complete the Purchasing Supplier Pre-Qualification process. Thank you for taking the time to respond to each one.

Process Overview
Process: Purchasing Supplier Pre-Qualification
Category: Banquet and catering services
Region: Ireland
Business unit: Data Centre & Building Services 1
Material: Not applicable
Process owner: Gillian Giblin
Message:

Questionnaire Overview

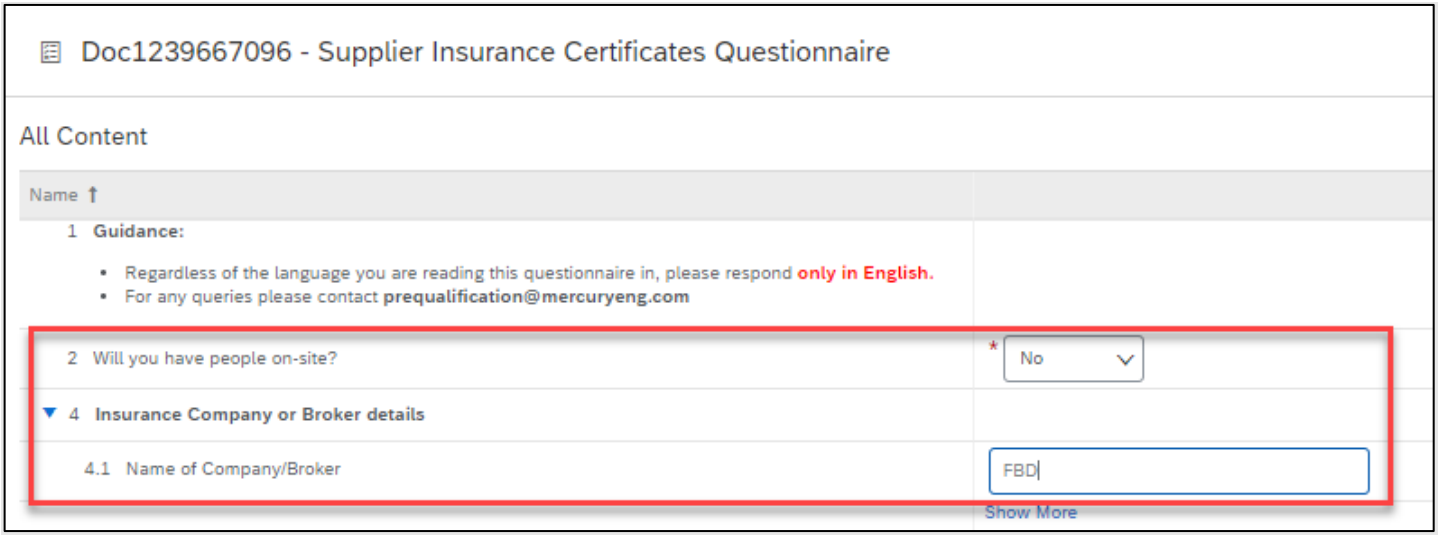
Name	Assigned To	Respond By
Supplier Insurance Certificates Questionnaire	Cali Cooks	December 30, 2022 at 5:49 AM
Quality Management Questionnaire	Cali Cooks	December 30, 2022 at 5:48 AM
Support and Service Questionnaire	Cali Cooks	December 30, 2022 at 5:48 AM

Step 1: Supplier Insurances Certificate Questionnaire

Your company may not need to upload any insurance information. It is only relevant to some countries and company types. The main items we will be seeking confirmation on are the following:

- Your insured business description adequately covers your scope of work/services with Mercury.
- Indemnity insurance limits comply with those set out in our minimum terms and conditions.
- Ensuring you have adequate territorial and jurisdiction limits under your policies.
- The insurances are current, and a broker/insurer cert is provided.

If the insurances are non-compliant with any of the above or information is not provided, we will be seeking additional information before we can approve.



- **Will you have people onsite?** Only answer Yes if employees will be working on our site.
- **Insurance Company** or **Broker details**:
  Include **Contact Name**, **Phone Number** and **Email Address** if known.

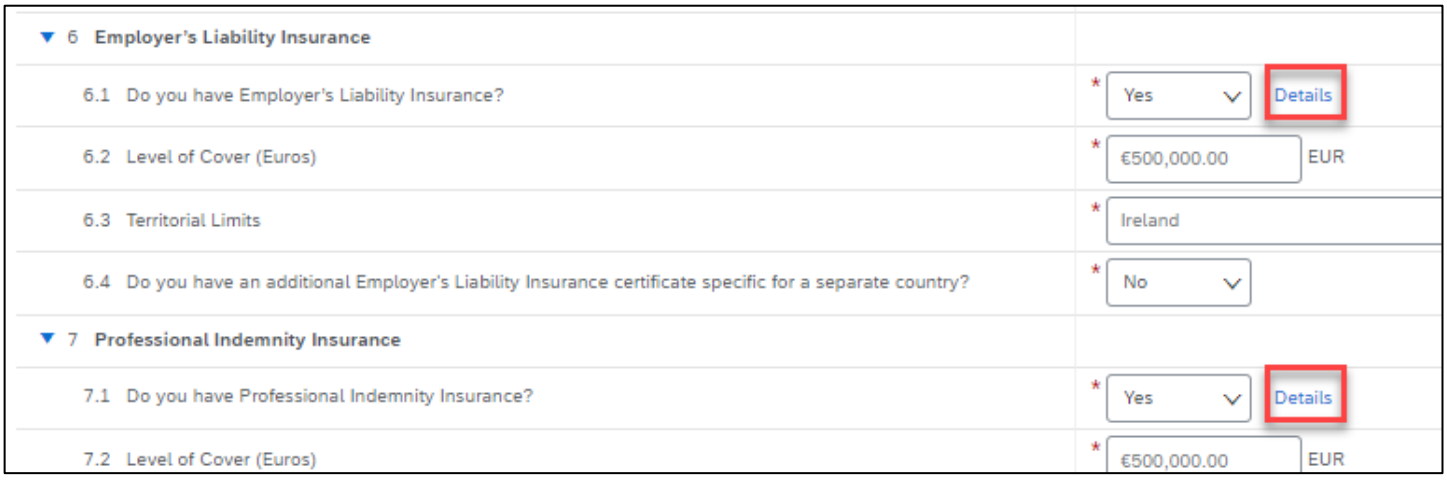
- **Public or Product Insurance:** If you have Public or Product Liability Insurance, you need to answer a few additional questions and click **Details** to input the certificate information.

Click Details to upload a copy of the certificate.

Choose No if you do not have insurance. It is not always a requirement.

Issuer, Year of Publication, Certificate Number, Certificate Location, Effective Date and Expiration Date are required fields.

If you have **Employer's Liability** and/or **Professional Indemnity Insurance**, you need to answer a few additional questions and click **Details** to input the certificate information.



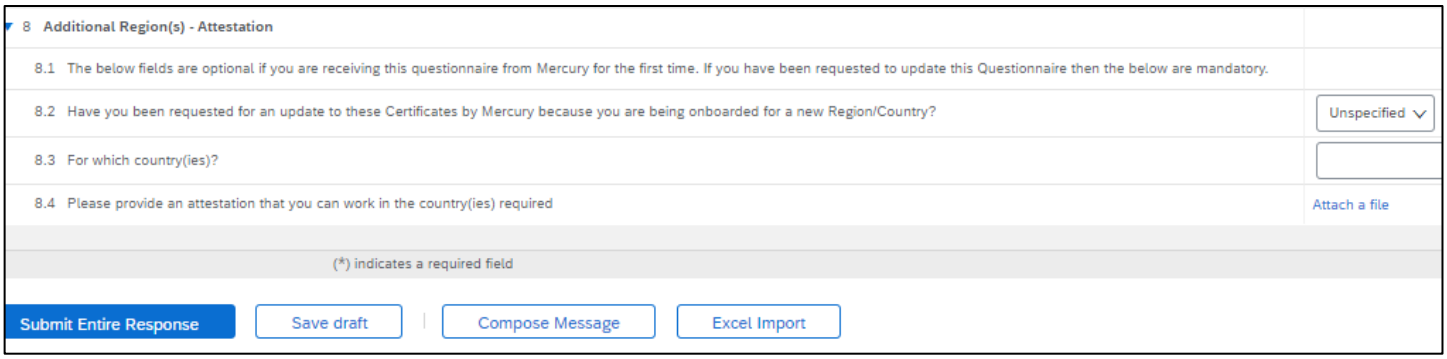
- **Do you have Employer's Liability Insurance?** Choose Yes/No.

Click Details to upload a copy of the certificate.

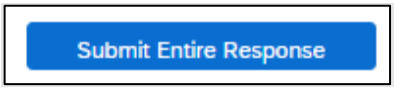
- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Insurance certificate specific to a separate country?** Yes/No.

Additional Region(s) – Attestation:

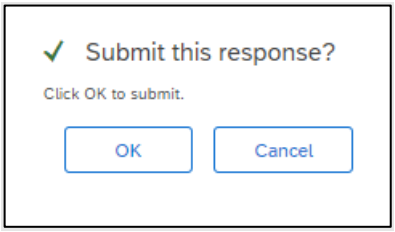
This section is directed to suppliers who are set up in Ariba but want to extend their details to include additional countries.



- **Have you been requested for an update to these Certificates by Mercury because you are being onboarded for a new Region/Country?**
  - Choose Yes if Mercury have asked you to submit certificates for an additional country.
  - Choose No if you are not applying to work in additional countries.



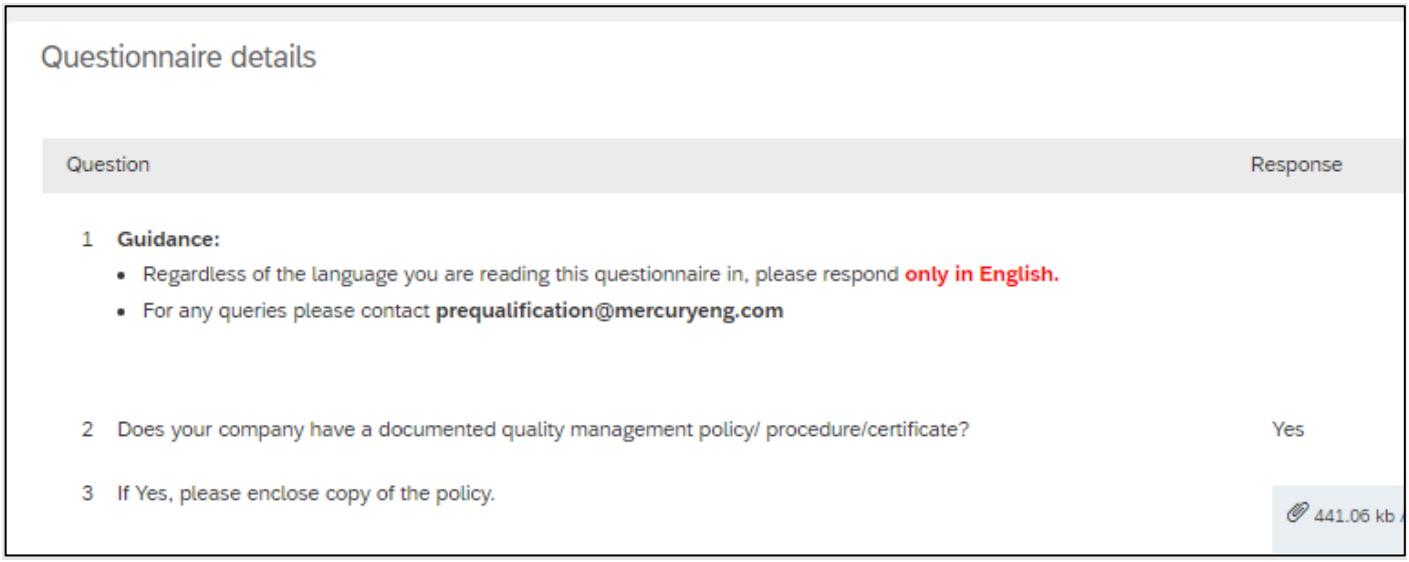
- Click **Submit Entire Response**.



- Click **OK**.
- A confirmation message will display.

Step 2: Quality Management Questionnaire

This is a mandatory field and upload.

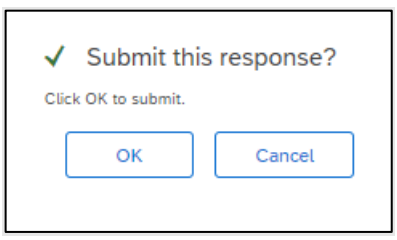


- **Does your company have a documented quality management policy / procedure / certificate?**
  - Choose Yes if you have a documented policy to upload.
  - Choose No if you do not have a policy.

- **Please enclose a copy of the policy.**

If you have a Quality policy document, please upload it here. If you do not have a policy attach your quality statement.

- Click **Attach a file.**
  This is a mandatory field and upload.

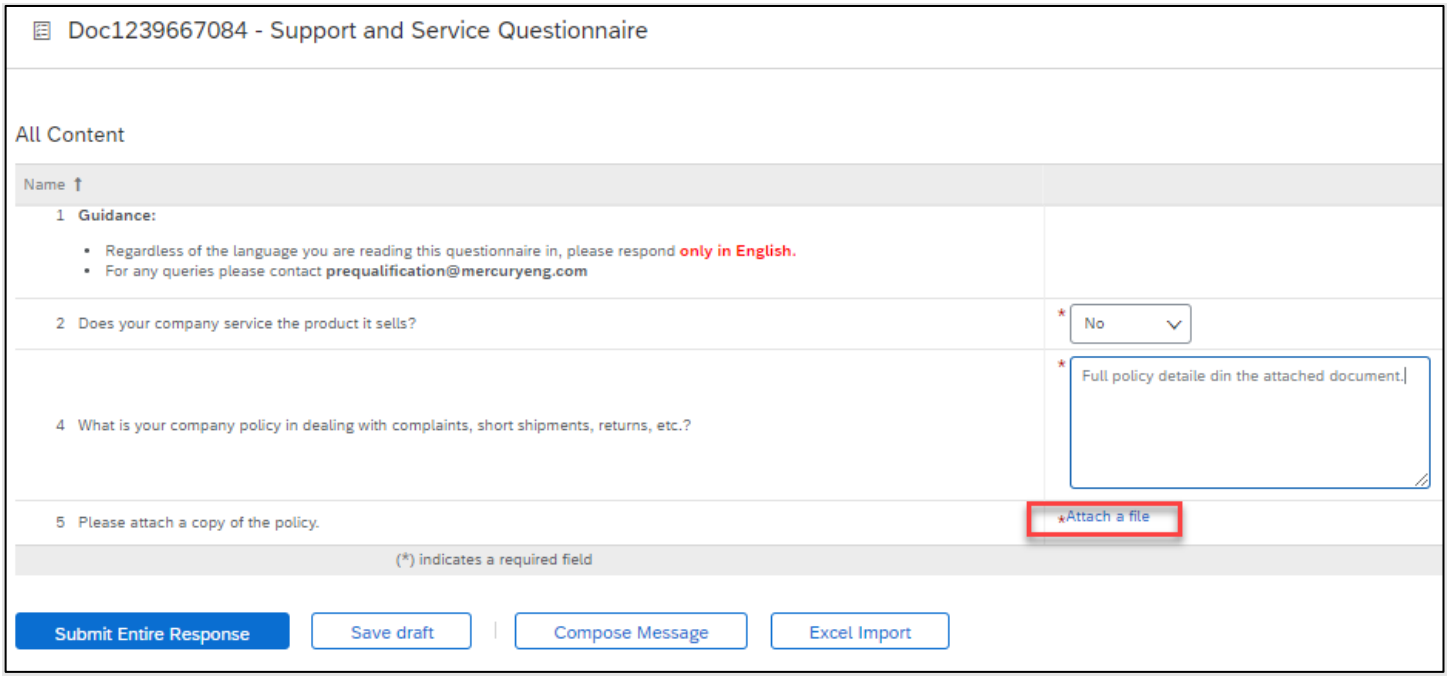


- Click **OK**.
- Click **Submit Entire Response**.
- A confirmation message will display.

Step 3: Support and Service Certificate Questionnaire

Your company may not need to upload any information. It is only relevant to some vendor types.

Please choose No if you do not service your products.



- **Does your company service the product it sells?**
  Only choose Yes if you provide after service to the product.

- **What is your company policy in dealing with complaints, short shipments, returns, etc?**
  You can type a response or copy and paste from your policy here.

- **Please attach a copy of the policy.**

- Click **OK**.
- Click **Submit Entire Response**.

Subcontractor Vendor Pre-Qualification Questionnaires

Subcontractor vendors receive some of the following Questionnaires:

1. Health, Safety, Quality & Environmental Management Certificates and Documents

   Health, Safety, Quality & Environmental Management Questionnaire (Lab/Con = Labour Agency or Consultant type vendor)

2. Insurance Certificates
3. Country specific Revenue
4. Legal
5. Quality Details
6. Sustainability
7. Miscellaneous
8. Financial Details

MERCURY

Hello Darragh Giblin,

Please fill out the listed questionnaires and return them by the specified dates. These questionnaires are necessary to complete the Subcontractor Pre-Qualification process. Thank you for taking the time to respond to each one.

Process Overview
Process: Subcontractor Pre-Qualification
Category: Building and Construction and Maintenance Services
Region: Ireland
Business unit: Intel

Questionnaire Overview

Name	Assigned To	Respond By
Health, Safety, Quality & Environmental Management Certificates and Documents	Darragh Giblin	January 20, 2023 at 2:59 PM
Insurance Certificates Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Irish Revenue Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Legal Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Quality Details Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Ireland (SUB) Health, Safety, Quality & Environmental Management Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Sustainability Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Miscellaneous Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM
Financial Details Questionnaire	Darragh Giblin	January 20, 2023 at 2:59 PM

Click Here to view the process.

Step 1A: Health, Safety, Quality & Environmental Management Certificates and Documents

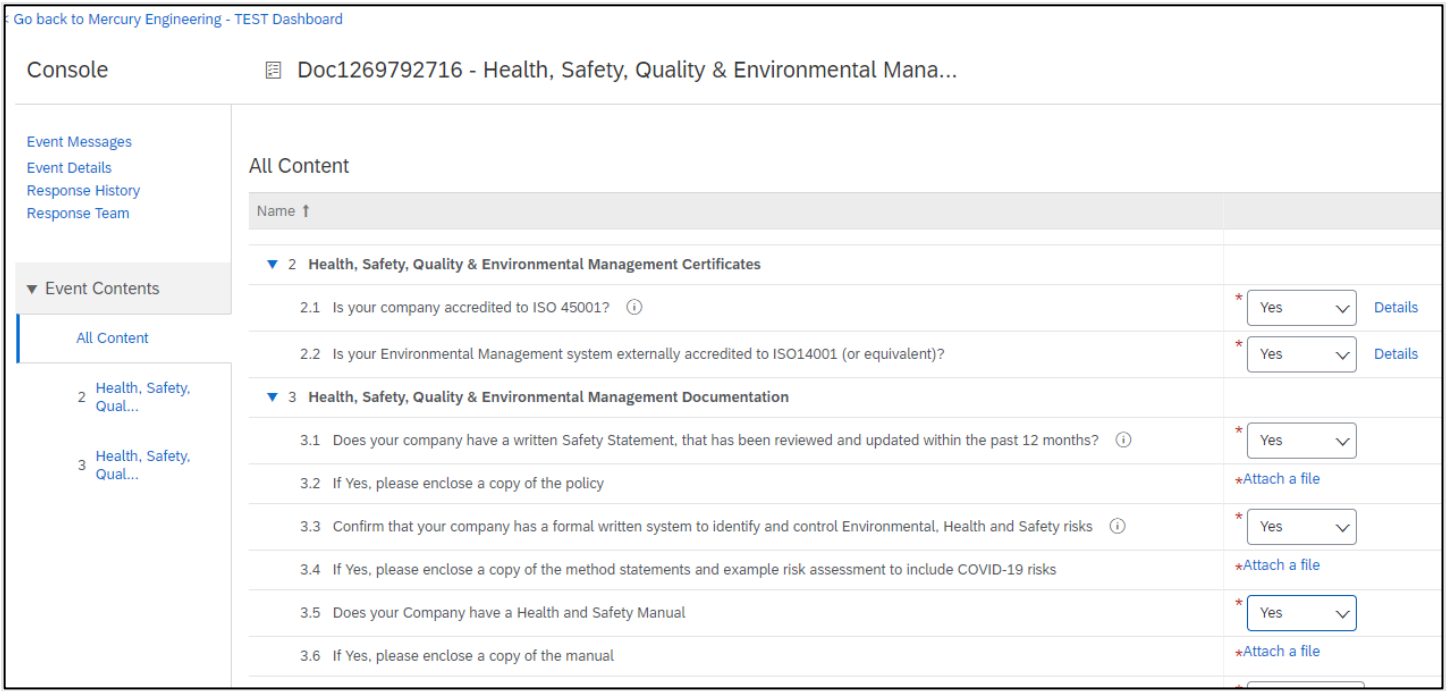
Note: There is a slight difference between the Health, Safety, Quality & Environmental Management *Certificates and Documents* form and the *Questionnaire* (explained in the next section).
The difference depends on which country you are in. Please complete both forms.

Health, Safety, Quality & Environmental Management Certificates

- Is your company accredited to ISO 45001?
  Choose Yes or No.

  Click Details to upload a copy of the certificate.
- Is your Environmental Management system externally accredited to ISO 45001 (or equivalent)?

  Click Details to upload a copy of the certificate.



Health, Safety, Quality & Environmental Management Documentation

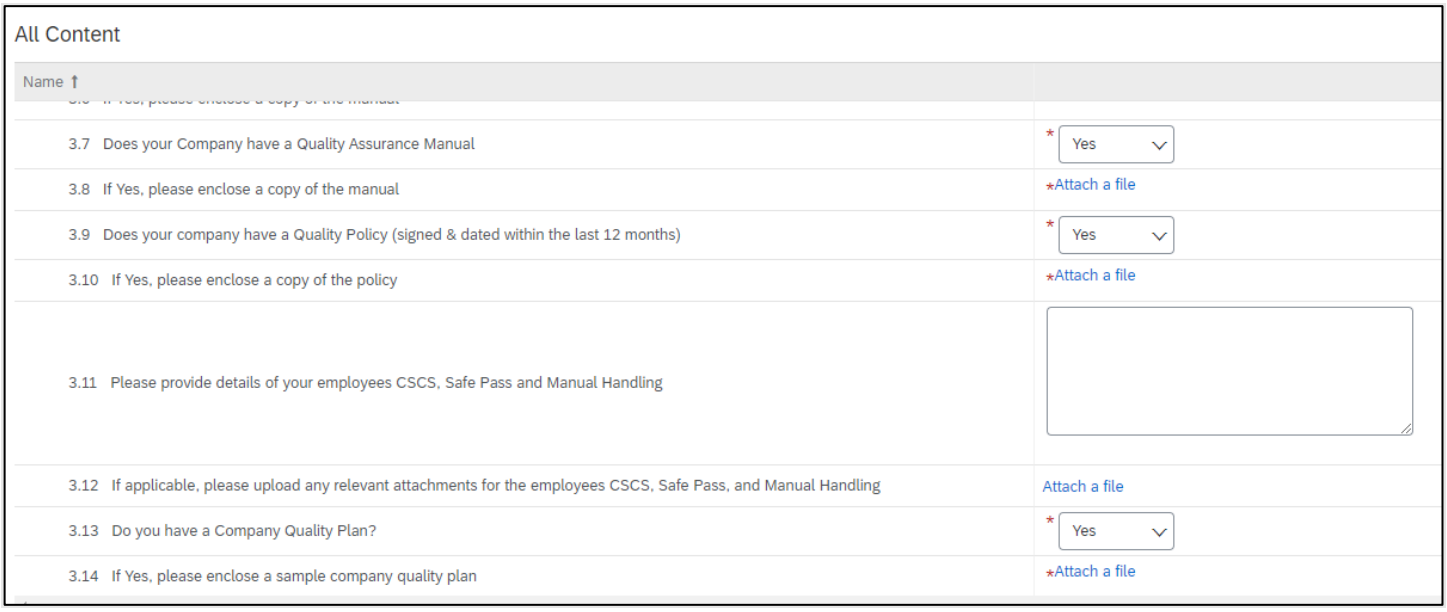
- Does your company have a written Safety Statement, that has been reviewed and updated within the past 12 months?
  If Yes, click Attach a file to upload a copy.

- Confirm that your company has a formal written system to identify Safety Statement, that has been reviewed and updated within the past 12 months?
  If Yes, click Attach a file to upload a copy.

- Confirm that your company has a formal written system to identify and control Environmental, Health and Safety risks.
  If Yes, please enclose a copy of the method statements and example risk assessment to

include COVID-19 risks.

- Does your company have a Health and Safety Manual?
  If Yes, click Attach a file to upload a copy.

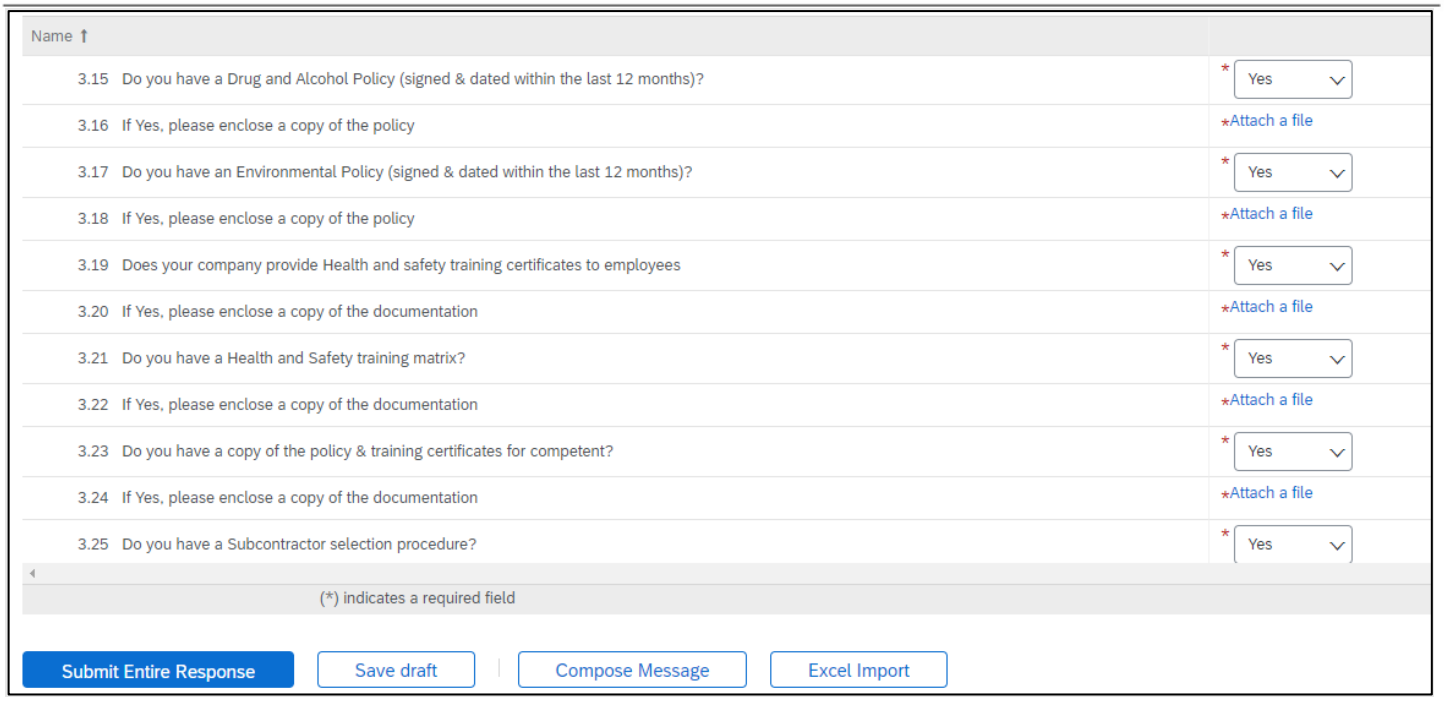

All Content

Name	
3.7 Does your Company have a Quality Assurance Manual	* Yes
3.8 If Yes, please enclose a copy of the manual	*Attach a file
3.9 Does your company have a Quality Policy (signed & dated within the last 12 months)	* Yes
3.10 If Yes, please enclose a copy of the policy	*Attach a file
3.11 Please provide details of your employees CSCS, Safe Pass and Manual Handling	
3.12 If applicable, please upload any relevant attachments for the employees CSCS, Safe Pass, and Manual Handling	Attach a file
3.13 Do you have a Company Quality Plan?	* Yes
3.14 If Yes, please enclose a sample company quality plan	*Attach a file

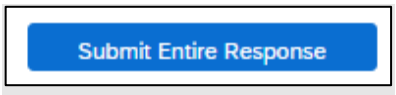
- Does your Company have a Quality Assurance Manual?
  If Yes, click Attach a file to upload a copy of the manual.

- Does your company have a Quality Policy (signed & dated within the last 12 months)?
  If Yes, please enclose a copy of the policy.

- Please provide details of your employees CSCS, Safe Pass and Manual Handling.
- Do you have a Company Quality Plan?
  If Yes, click Attach a file to upload a copy of the plan.



- Do you have a Drug and Alcohol Policy (signed & dated within the last 12 months)?
  If Yes, click Attach a file to upload a copy of the policy.
- Do you have an Environmental Policy (signed & dated within the last 12 months)?
  If Yes, please enclose a copy of the policy.
- Does your company provide Health and Safety training certificates to employees?
  If Yes, click Attach a file to upload a copy of the plan.
- Do you have a Health and Safety training matrix?
  If Yes, click Attach a file to upload a copy.
- Do you have a copy of the policy & training certificates?
  If Yes, click Attach a file to upload a copy.
- Do you have a Subcontractor selection procedure? Choose Yes or No.

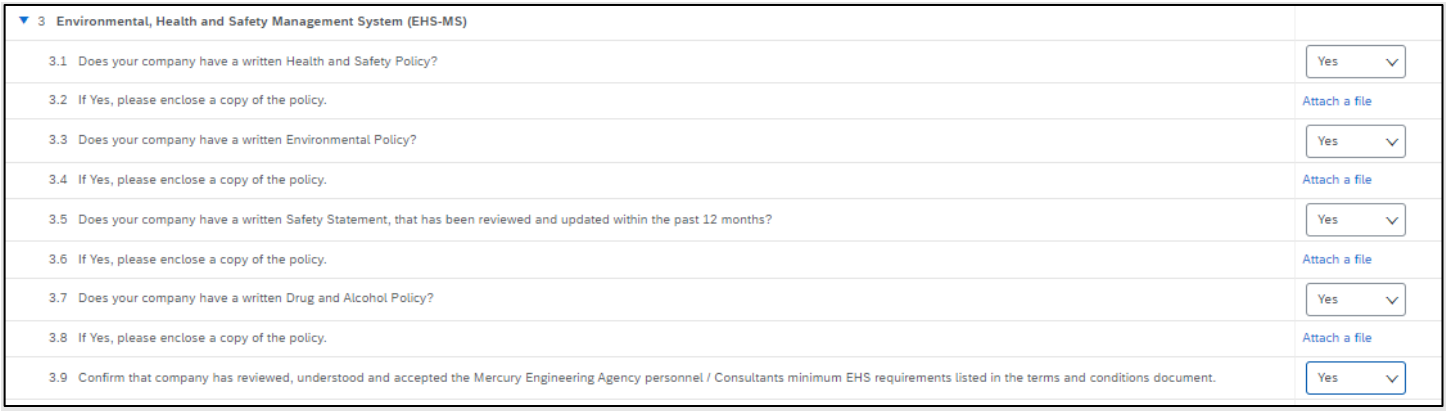
Click 

Step 1B: Health, Safety, Quality, & Environmental Management Questionnaire

This form requires your EHS details. We will be reviewing your safety statement, health safety policy and risk assessment.

- ## EHS Contact details

- **Name**: who is your EHS contact?
- **Title**: what is their job role?
- **Qualifications**: what are their qualifications or certifications for the position?
- **Phone Number**: what is their number?
- **Email address**: what is their email?



- ## Environmental. Health and Safety Management System (EHS MS)

- **Does your company have a written Health and Safety policy?**
- If yes, please enclose a copy - Click Attach a file to upload.

- **Does your company have a written Environmental policy?**
- If yes, please enclose - Click Attach a file to upload.

- **Does your company have a Safety Statement that has been reviewed and updated in the last 12 months?**
- If yes, please enclose - Click Attach a file to upload.

- **Does your company have a drug and alcohol policy?**
- If yes, - Click Attach a file to upload.

- **Confirm that company has reviewed, understood, and accepted the Mercury Engineering Agency personnel / Consultants minimum EHS requirements linked in the terms and conditions document.**
  Choose Yes or No.

<u>List the number of Environmental, Health and Safety prosecutions by any governing body, whether in the company's base country or elsewhere:</u>

- **Advise whether the Company, or its officers or Directors, current or former, have received Statutory Notices by relevant Regulatory Body or other enforcing body, in the last 5 years.**
  Choose Yes or No.
  If Yes, please provide details.

<u>List the Company statistics as follows:</u>
<u>Last year:</u>

- Provide details of any Health and Safety prosecutions last year.

Two years Ago:

- Provide details of any Health and Safety prosecutions two years ago.

Three years Ago:

- Provide details of any Health and Safety prosecutions three years ago.

Four years Ago:

- Provide details of any Health and Safety prosecutions four years ago.

Environmental Health and Safety Incident Statistics:

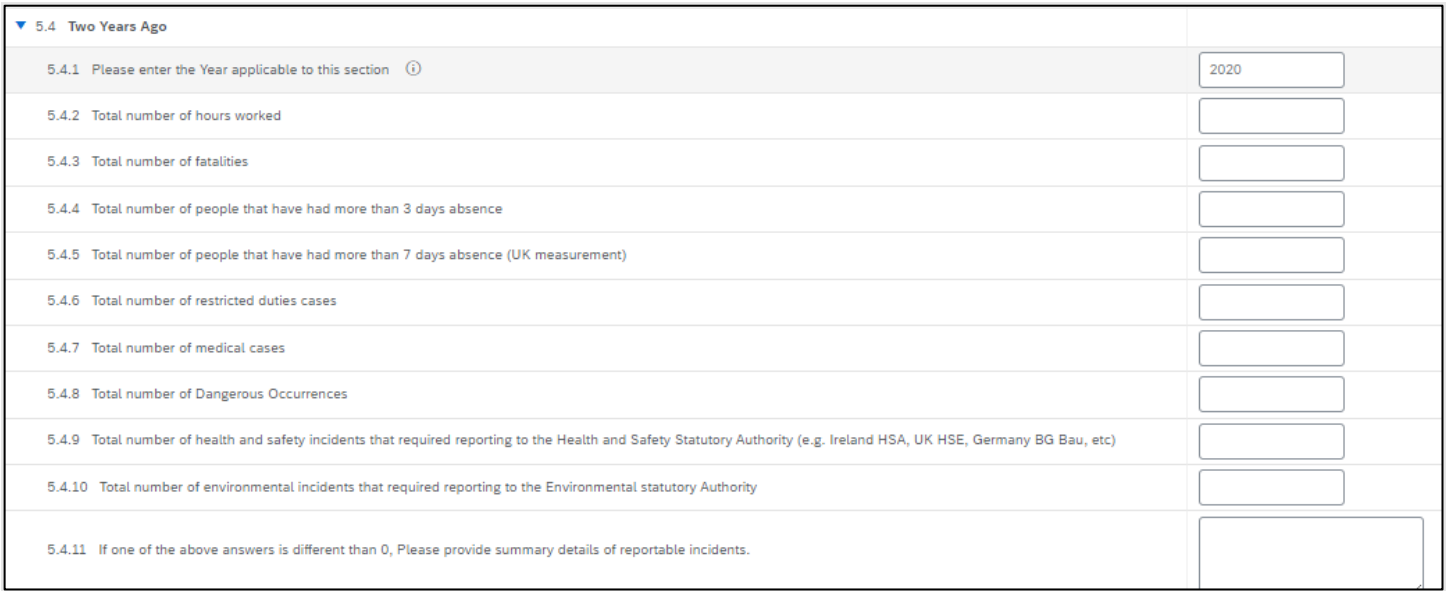
- **Does your company have a system for both reporting and investigating EHS incidents?** Choose Yes or No.

5 Environmental, Health and Safety Incident Statistics	
5.1 Does your Company have a system for both reporting and investigating EHS incidents?	Yes
5.2 List the Company's incident statistics as follows:	
5.3 Last Year	
5.3.1 Please enter the Year applicable to this section	2021
5.3.2 Total number of hours worked	256,000
5.3.3 Total number of fatalities	0
5.3.4 Total number of people that have had more than 3 days absence	6
5.3.5 Total number of people that have had more than 7 days absence (UK measurement)	1
5.3.6 Total number of restricted duties cases	0
5.3.7 Total number of medical cases	2
5.3.8 Total number of Dangerous Occurrences	0
5.3.9 Total number of health and safety incidents that required reporting to the Health and Safety Statutory Authority (e.g. Ireland HSA, UK HSE, Germany BG Bau, etc)	0
5.3.10 Total number of environmental incidents that required reporting to the Environmental statutory Authority	0
5.3.11 If one of the above answers is different than 0. Please provide summary details of reportable incidents.	

Last year:
List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority

- If one of the above is different than 0, please provide details of reportable incidents.



5.4 Two Years Ago	
5.4.1 Please enter the Year applicable to this section	2020
5.4.2 Total number of hours worked	
5.4.3 Total number of fatalities	
5.4.4 Total number of people that have had more than 3 days absence	
5.4.5 Total number of people that have had more than 7 days absence (UK measurement)	
5.4.6 Total number of restricted duties cases	
5.4.7 Total number of medical cases	
5.4.8 Total number of Dangerous Occurrences	
5.4.9 Total number of health and safety incidents that required reporting to the Health and Safety Statutory Authority (e.g. Ireland HSA, UK HSE, Germany BG Bau, etc)	
5.4.10 Total number of environmental incidents that required reporting to the Environmental statutory Authority	
5.4.11 If one of the above answers is different than 0, Please provide summary details of reportable incidents.	

Two years Ago:

List the Company's incident statistics as follows:

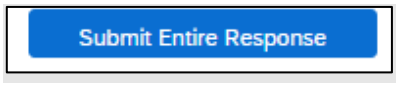
- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Three years Ago:
List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Four years Ago:
List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Click 

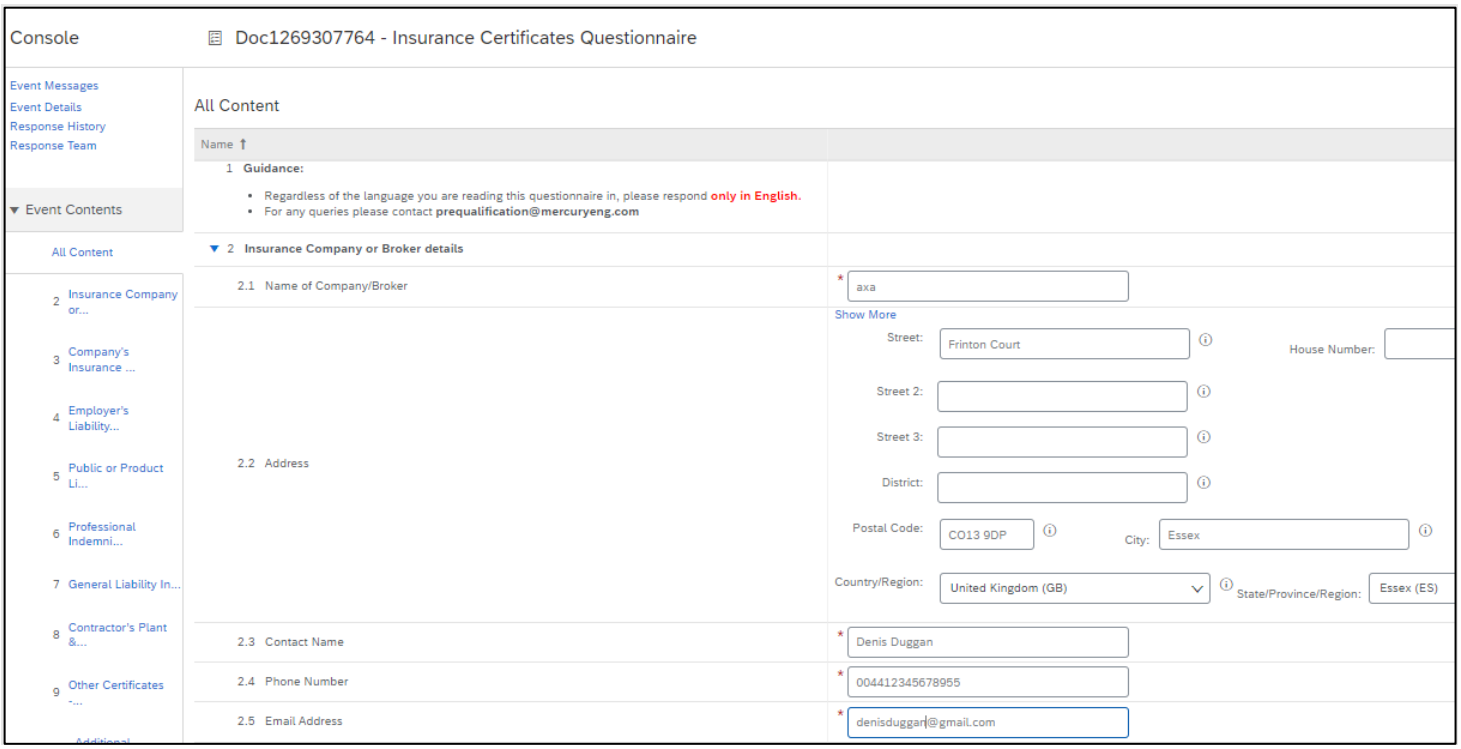
Click **OK**.

Step 2: Insurances Certificate Questionnaire

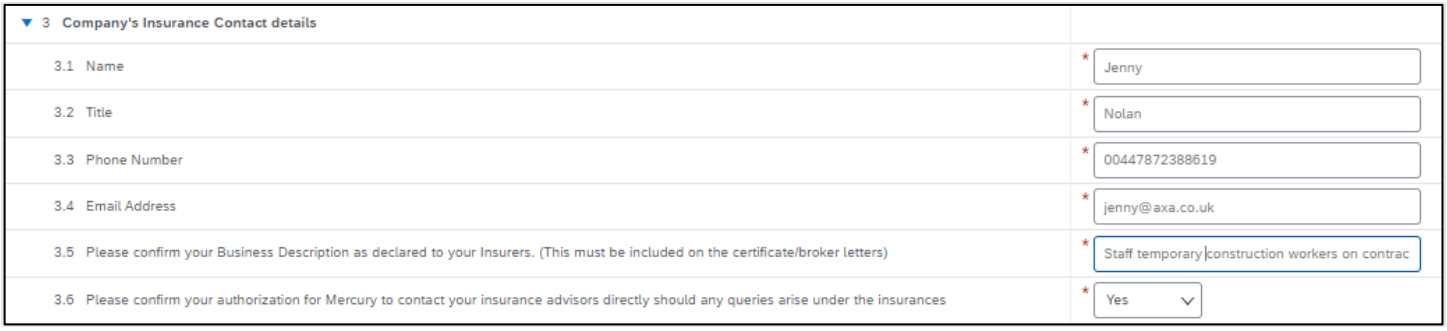
Your company may not have all the types of insurance asked for in this questionnaire. They are not necessarily required depending on your business. The main items we will be seeking confirmation on are the following:

- Your insured business description adequately covers your scope of work/services with Mercury.
- Indemnity insurance limits comply with those set out in our minimum terms and conditions.
- Ensuring you have adequate territorial and jurisdiction limits under your policies.
- The insurances are current, and a broker/insurer cert is provided.

If the insurances are non-compliant with any of the above or information is not provided, we will be seeking additional information before we can approve.



- **Name of Company/Broker:** input the name of your insurance company.
- **Address, Contact, Phone Number and Email Address**: of the insurance company.



- **Company's Insurance Contact Details**:

  - Insert the **Name**, **Title**, **Phone Number** and **Email Address** of the insurance company contact you have been in contact with.
  - **Please confirm your Business Description as declared to your Insurers.** Insert the same description as provided on your insurance.
  - **Please confirm your authorization to contact your insurance advisors directly should any queries arise under the insurances.** Choose Yes.

Employers Liability Insurance or Workers Compensation:

- **Do you have Employer's Liability Insurance / Workers Compensation?**
- Choose Yes/No.

  Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.

Public or Product Insurance:

- **Do you have Public / Product Liability Insurance?**
- Choose Yes/No.

  Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Public Liability Insurance certificate specific to a separate country?** Yes or No.

Professional Indemnity Insurance:

- **Do you have Professional Indemnity Insurance?**.
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

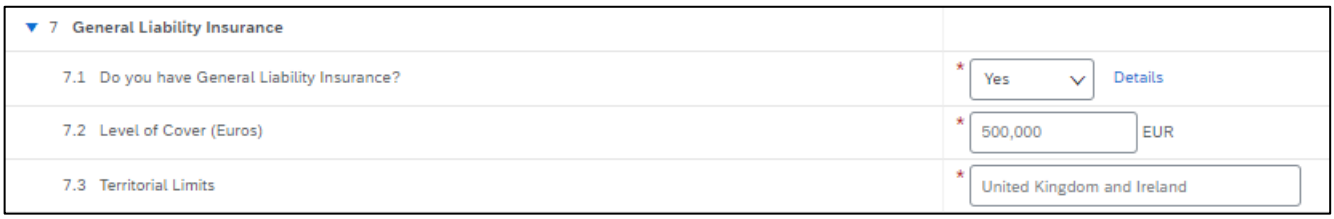
- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Professional Indemnity Insurance certificate specific to a separate country?** Yes or No.

General Liability Insurance:



- **Do you have General Liability Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.

Contractor's Plant & Equipment "All Risks" Insurance:

- **Do you have Contractor's Plant & Equipment "All Risks" Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

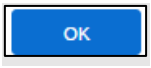
to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.

Other Certificates:

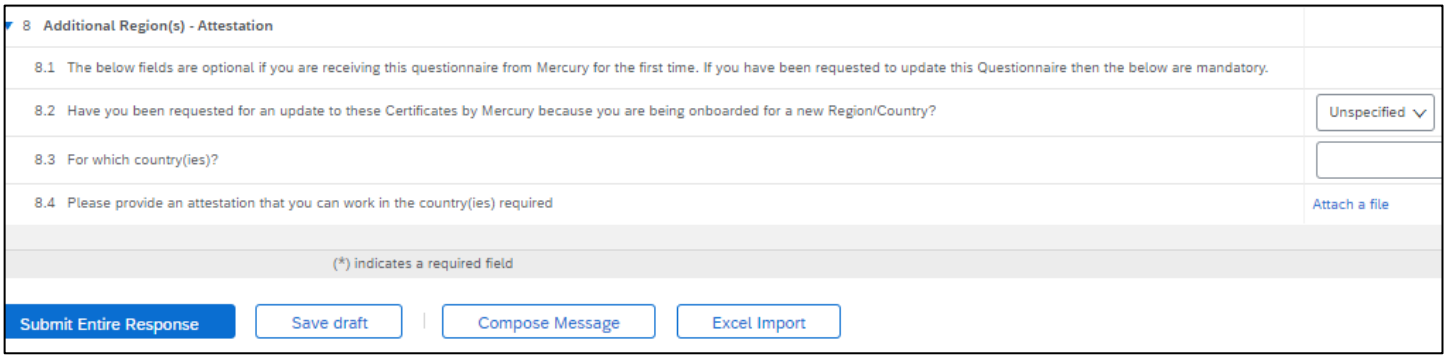
- **Do you have a Motor Insurance certificate?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

Click 

to return to the questionnaire.

Additional Region(s) – Attestation

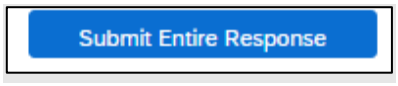


These next fields are optional if you are receiving this questionnaire from Mercury for the first time.

If you have been requested to update this Questionnaire, then the below are mandatory.

- Choose Yes if Mercury have asked you to submit certificates for an additional country.
- Choose No if you are not applying to work in additional countries.

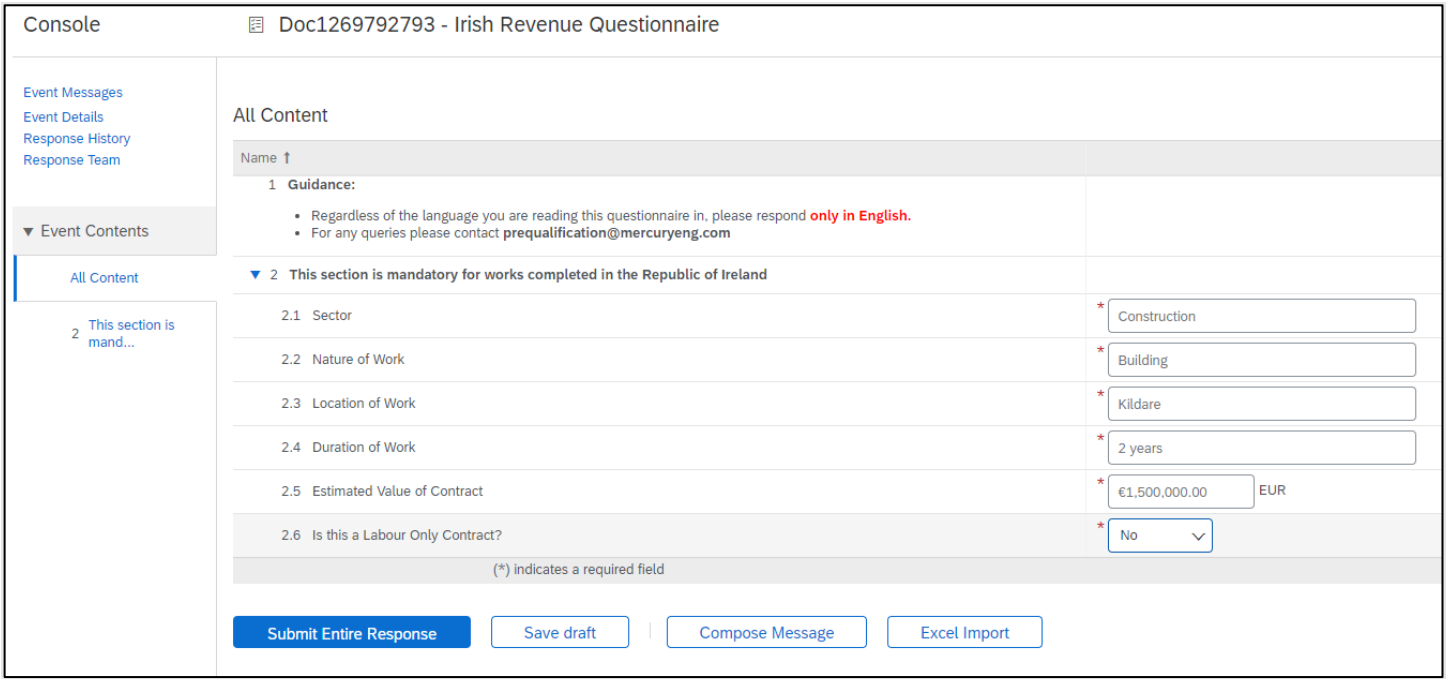
- Choose Attach a file if you need to show proof to work in another country.

Click 

Click **OK**.

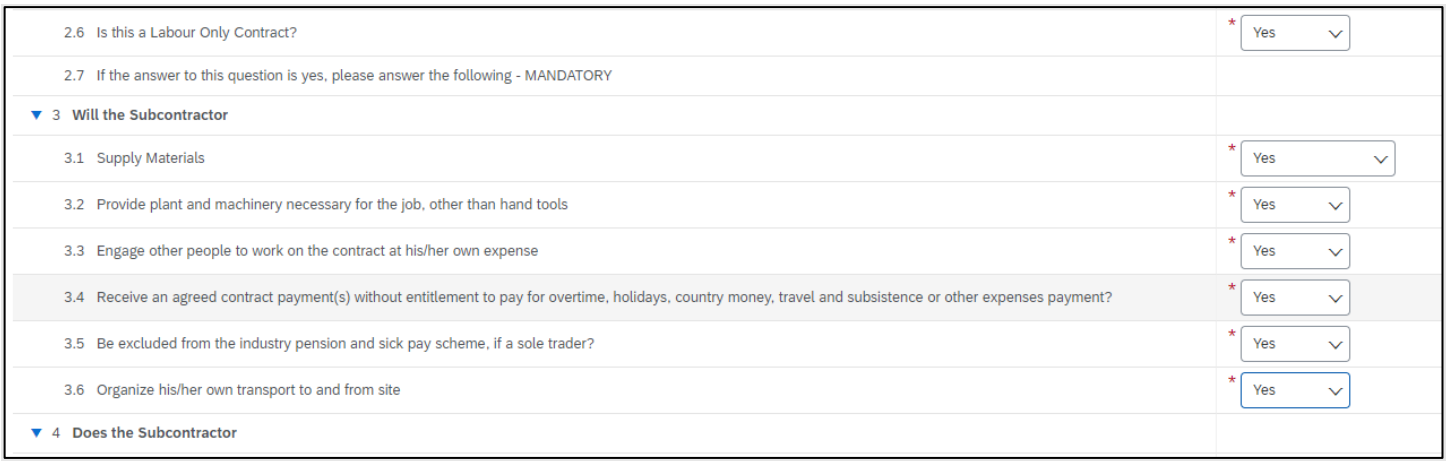
Step 3: Irish Revenue Questionnaire

This questionnaire is specific to subcontractors in Ireland.
This only needs to be completed by Irish subcontractors.



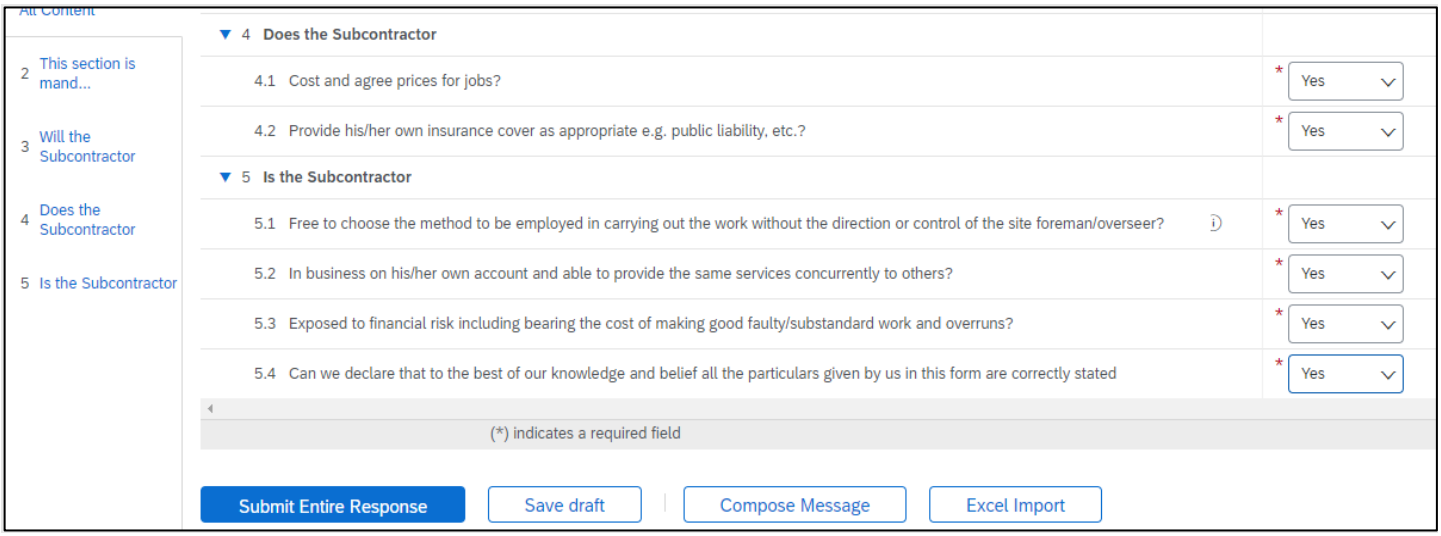
Section for works completed in the Republic of Ireland
These are free text but mandatory fields to complete:

- **Sector**
- **Nature of Work**
- **Location of Work**
- **Duration of Work**
- **Estimated Value of Contract?**
- **Is this a Labour Only Contract?**
  If Yes, there are additional questions**:**



Choose Yes or No to the following questions:
Will the Subcontractor:

- Supply Materials?
- Provide plant and machinery necessary for the job, other than hand tools?
- Engage other people to work on the contract at his/her own expense?
- Receive an agreed payment contract at his/her expense?
- Receive an agreed contract payment(s) without entitlement to pay for overtime, holidays, country money, travel and subsistence or other expenses payment?
- Be excluded from the industry pension and sick pay scheme if a sole trader?
- Organize his/her own transport to and from site?



Choose Yes or No to the following questions:
Does the Subcontractor:

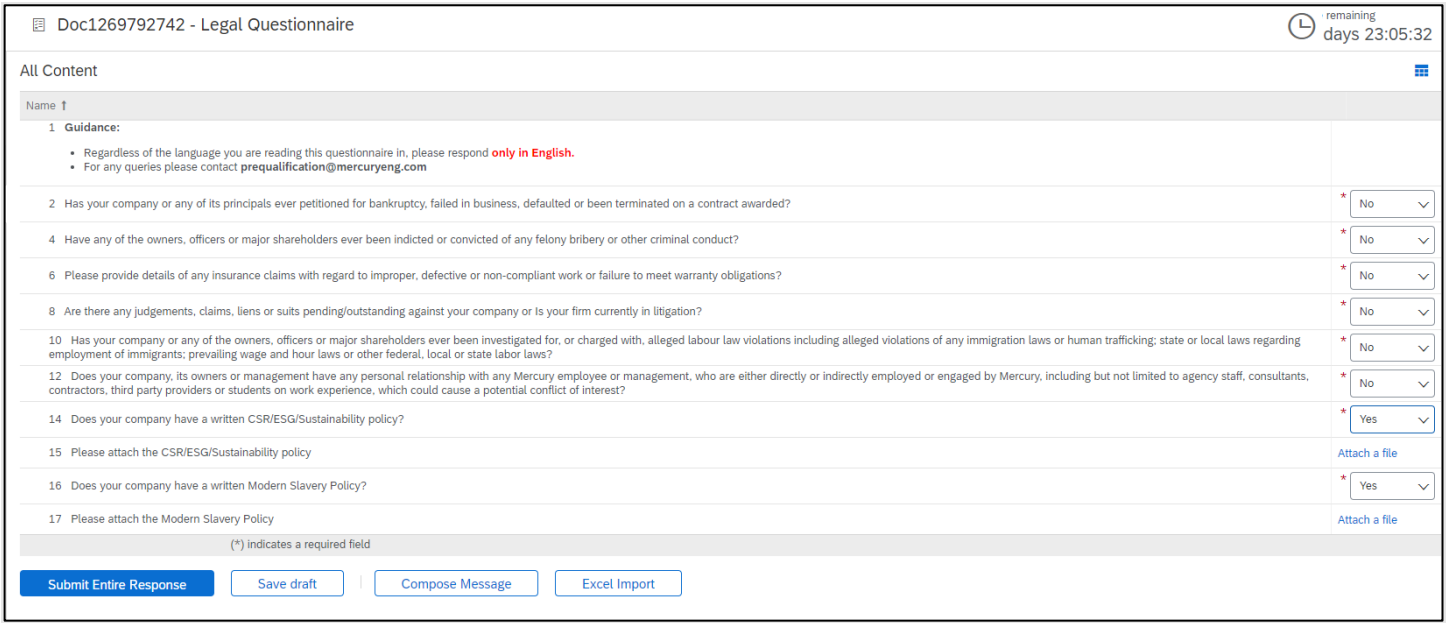
- Cost and agree prices for jobs?
- Provide his/her own insurance cover as appropriate e.g., public liability, etc.?

Is the Subcontractor:

- Free to choose the method to be employed in carrying out the work without the direction or control of the site of the site foreman/overseer?
- In business on his/her own account and able to provide the same services concurrently to others?
- Exposed to financial risk including bearing the cost of making good faulty/substandard work and overruns?
- Can we declare that to the best of our knowledge and belief all the particulars given by us in this form are correctly stated?

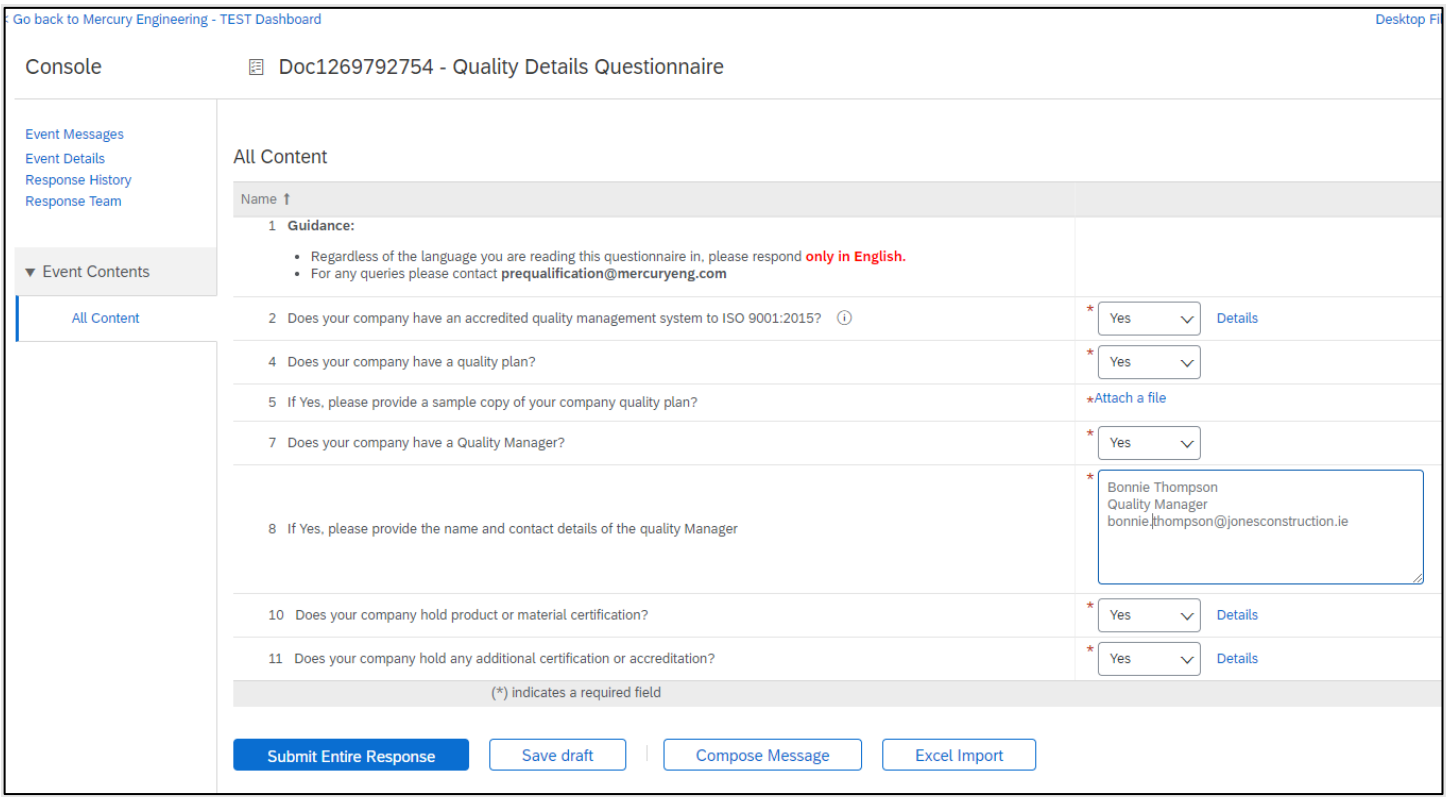
Step 4: Legal Questionnaire

This questionnaire is for the legal team.
Please answer Yes or No. Where you see Attach a file, please upload your policy.

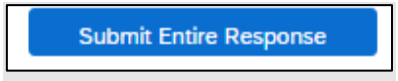


- **Has your company or any of its principals ever petitioned for bankruptcy, failed in business, defaulted, or been terminated on a contract award?**
- **Have any of the owners, officers or major shareholders ever been indicted or convicted or any felony bribery or other criminal conduct?**
- **Please provide details of any insurance claims about improper, defective, or non-compliant work or failure to meet warranty obligations?**
- **Are there any judgements, claims, liens, or suits pending/outstanding against your company or is your firm currently in litigation?**
- **Has your company or any of the owners, officers or major shareholders ever been investigated for, or charged with alleged labour law violations of any immigration laws or human trafficking state or local laws regarding employment of immigrants, prevailing wage, and hour laws or other federal, local, or state labor laws?**
- **Does your company or any of the owners or management have any personal relationship with any Mercury employee or management, who are either directly or indirectly employed or engaged by Mercury, including but not limited to agency staff, consultants, contractors, third party providers or students on work experience, which could cause a potential conflict of interest?**
- **Does your company have a written CSR/ESG/Sustainability policy?** Please attach.
- **Does your company have a written Modern Slavery Policy?** Please attach.

Step 5: Quality Details

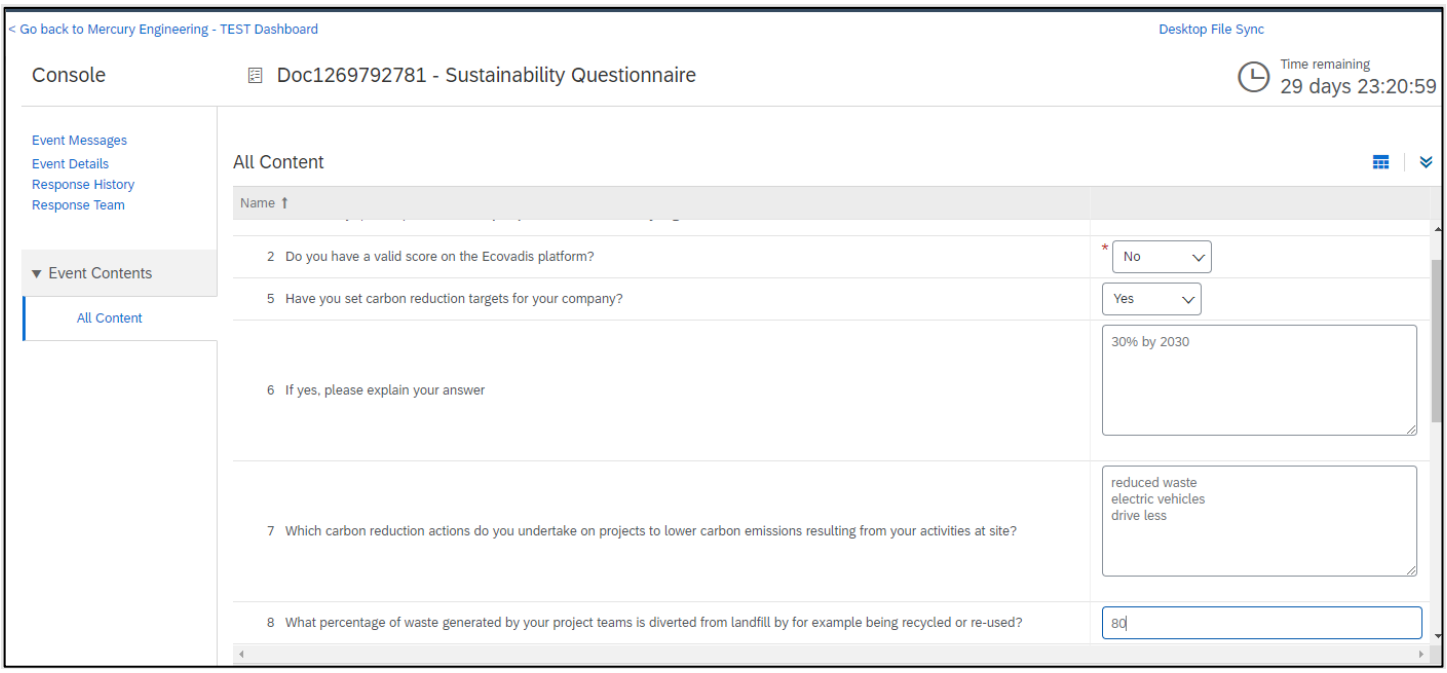


- **Does your company have an accredited quality management system to ISO 9001:2015?**
- **Does your company have a quality plan?**
  If Yes, please click Attach a file to upload the plan.
- **Does your company have a Quality Manager?**
- **Does your company hold product or material certification?**
  If Yes, please click Details to upload.
- **Does your company hold any additional certification or accreditation?**
  If Yes, please click Details to upload.

Click 

Click **OK**.

Step 6: Sustainability

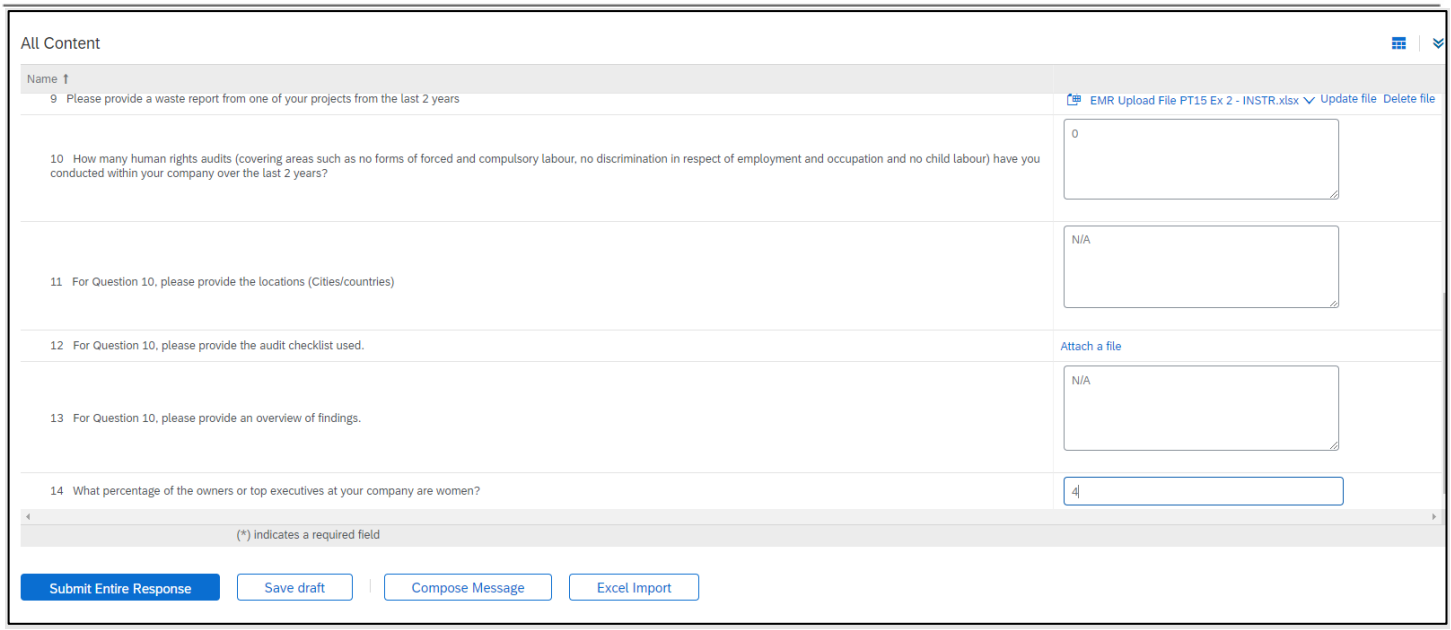


- **Do you have a valid score on the EcoVadis platform?**
  The (**0-100**) score reflects the quality of the company's sustainability management system at the time of the assessment.

- **Have you set carbon reduction targets for your company?**
- If Yes, please explain your answer.

- **Which carbon reduction actions do you undertake on projects to lower carbon emissions resulting from your activities at site?**

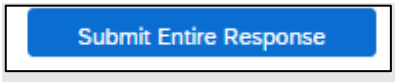
- **What percentage of waste generated by your project teams is diverted from landfill by recycling or re-use?**



- **Please provide a waste report from one of your projects for the last 2 years.** Attach a file**.**

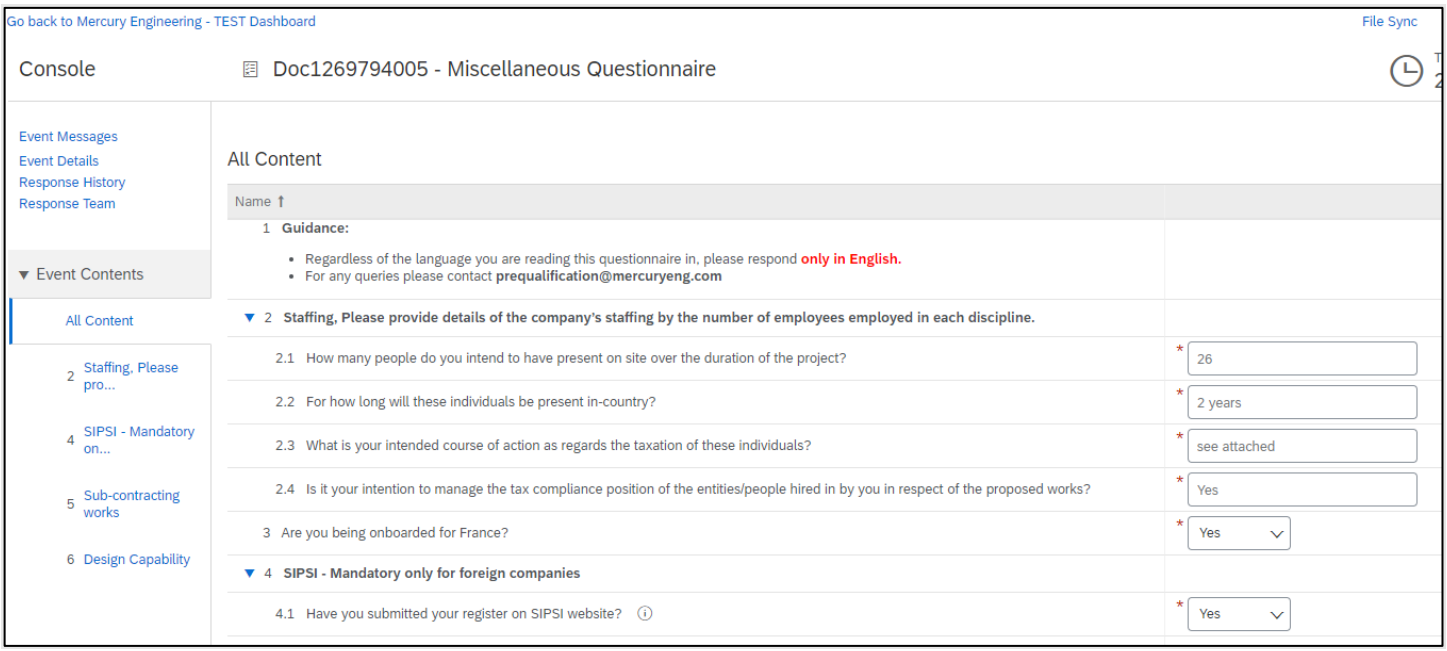
- **How many human rights audits (covering areas such as no forms of forced and compulsory labour, no discrimination in respect of employment and occupation and no child labour) have you conducted with your company over the last 2 years?**
- Please provide the locations.
- Please provide the audit checklist.
- Please provide an overview of the findings.

- **What percentage of the owners or top executives at your company are women?**

Click 

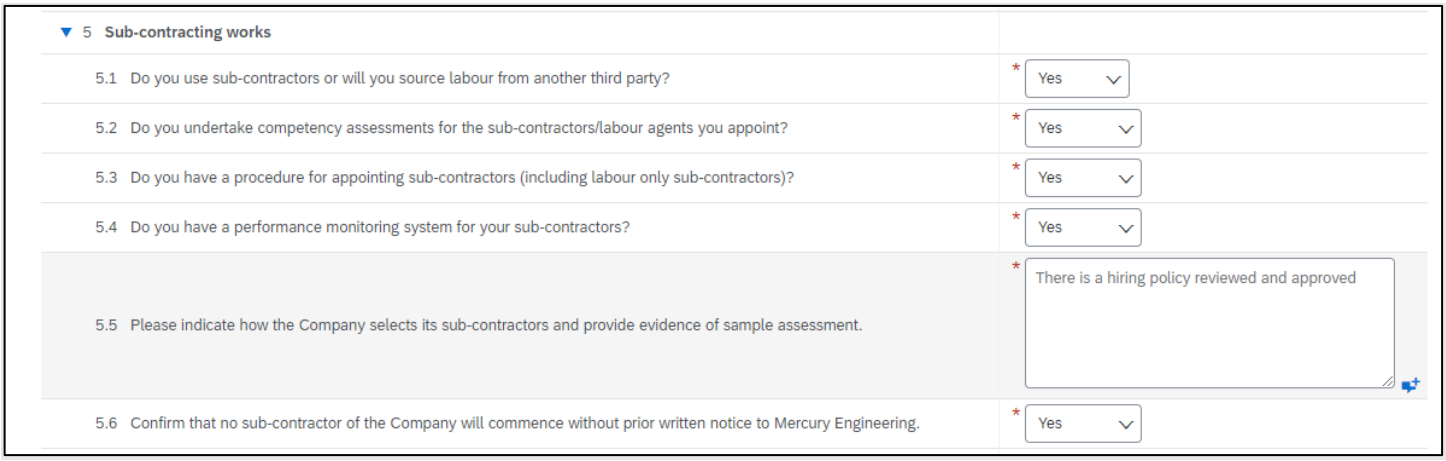
Click **OK**.

Step 7: Miscellaneous Questionnaire



Staffing, please provide details of the company's staffing by the number of employees employed in each discipline:

- **How many people do you intend to have present on site over the duration of the project?**
- **For how long will these individuals be present in-country?** This may not be confirmed.
- **What is your intended course of action regarding the taxation of these individuals?** Please explain your process for taxing your employees.
- **Is it your intention to manage the tax compliance position of the entities/people hired by you in respect of the proposed works?** Yes or no.
- **Are you being onboarded for France?** Yes or no.
  If Yes: **Have you submitted your register on SIPSI website?**
  This is only relevant for those companies working in France.

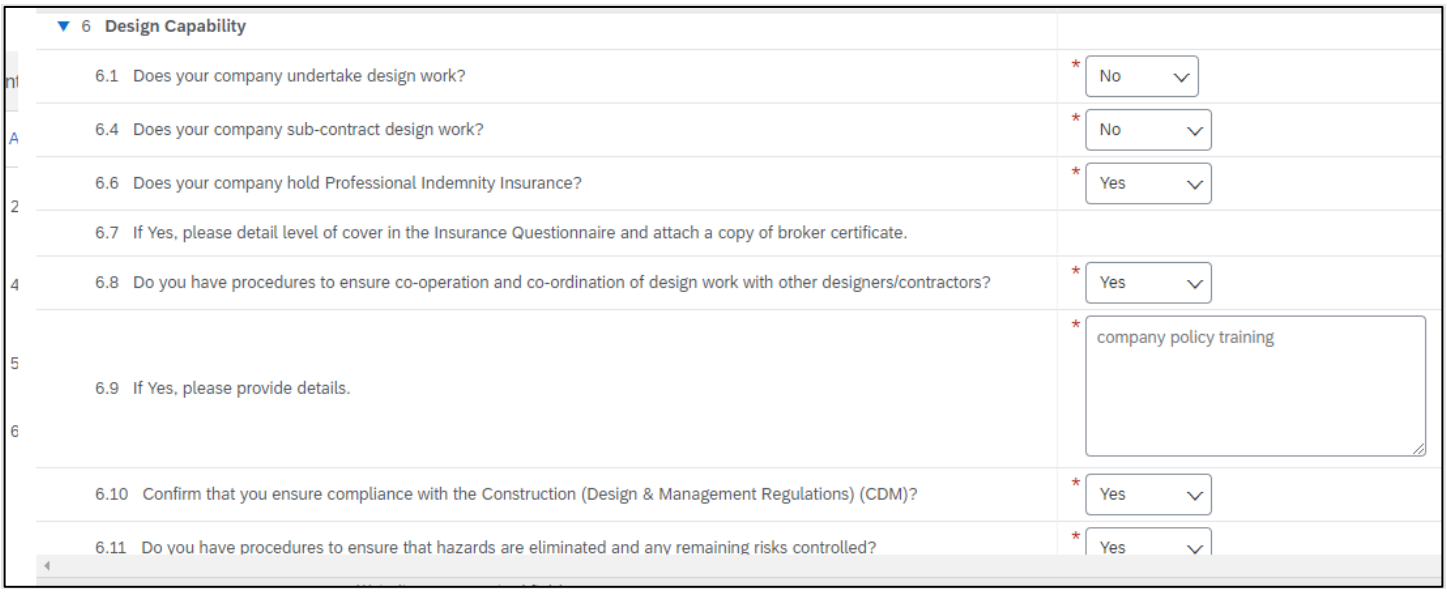


5 Sub-contracting works	
5.1 Do you use sub-contractors or will you source labour from another third party?	* Yes
5.2 Do you undertake competency assessments for the sub-contractors/labour agents you appoint?	* Yes
5.3 Do you have a procedure for appointing sub-contractors (including labour only sub-contractors)?	* Yes
5.4 Do you have a performance monitoring system for your sub-contractors?	* Yes
5.5 Please indicate how the Company selects its sub-contractors and provide evidence of sample assessment.	* There is a hiring policy reviewed and approved
5.6 Confirm that no sub-contractor of the Company will commence without prior written notice to Mercury Engineering.	* Yes

Sub-contracting works:

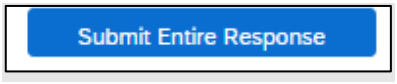
- **Do you use subcontractors, or will you source your labour from another third party?**
- **Do you undertake competency assessments for the subcontractors/labour agents you appoint?**
- **Do you have a procedure for appointing subcontractors (including labour only subcontractors)?**
- **Do you have a performance monitoring system for your subcontractors?**
- **Please indicate how the Company selects its subcontractors and provide evidence of sample assessment?**
- **Confirm that no sub-contractor of the Company will commence without prior written notice to Mercury Engineering.**

  Choose Yes or No.



Design Capability:

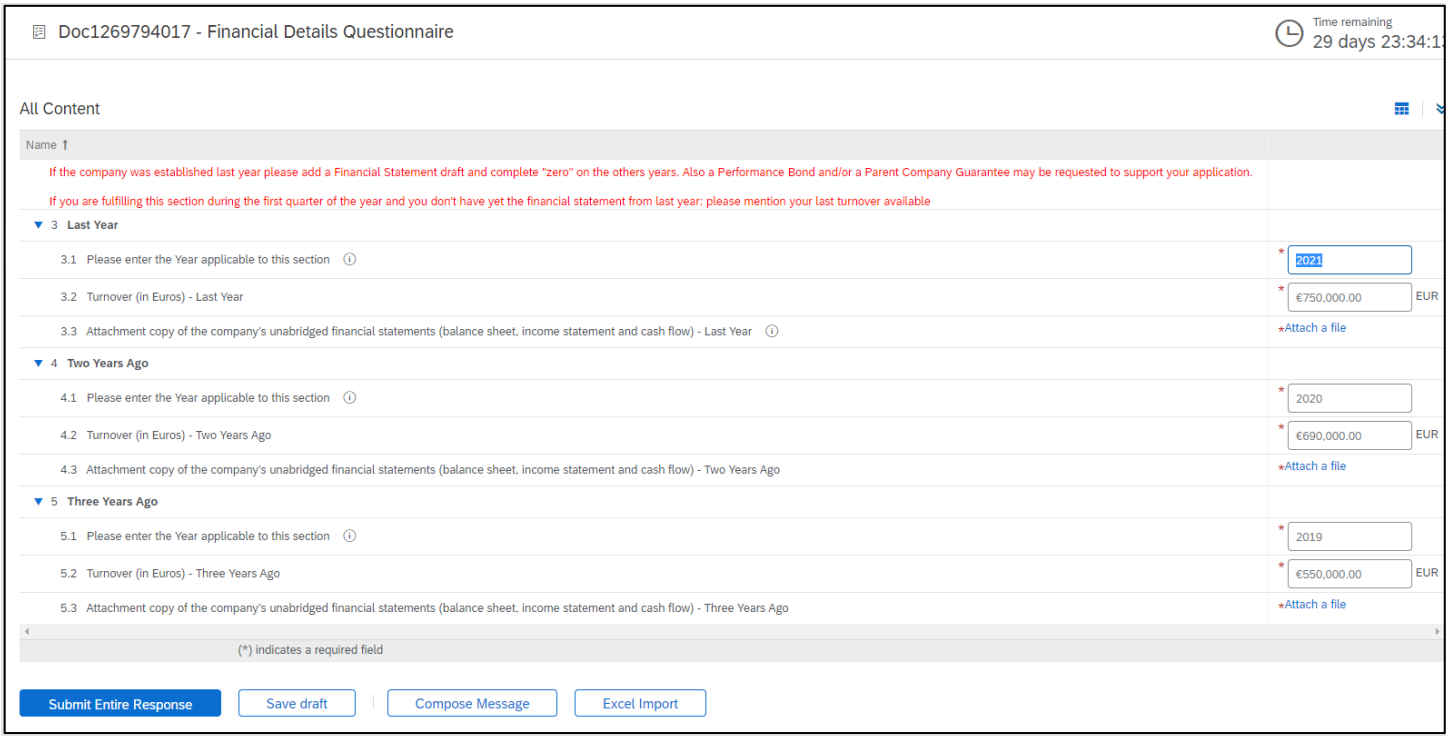
- **Does your company undertake design work?**
- **Does your company sub-contract design work?**
- **Does your company hold Professional Indemnity Insurance?**
  If Yes, please detail the level of cover in the Insurance questionnaire and attach a copy of broker certificate.
- **Do you have procedures to ensure co-operation and co-ordination of design work with other designers/contractors?**
  If Yes, please provide details.
- **Confirm that you ensure compliance with the Construction Design (& Management Regulations) (CDM)?**
- **Do you have procedures to ensure that hazards are eliminated, and any remaining risks controlled?**
- If Yes, please provide details.

Click 

Click **OK**.

Step 8: Financial Details

Financial Details Questionnaire



Last year

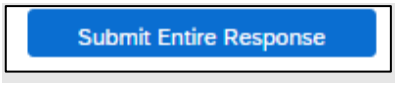
- **Turnover in euro**
- **Attachment copies of the company's unabridged financial statements (balance sheet, income statement and cash flow**

Two years ago

- **Turnover in euro**
- **Attachment copies of the company's unabridged financial statements (balance sheet, income statement and cash flow**

Three years ago

- **Turnover in euro**
- **Attachment copies of the company's unabridged financial statements (balance sheet, income statement and cash flow**

Click 

Click **OK**.

Consultant Vendor Pre-Qualification Questionnaires

Consultant vendors receive the following Questionnaires:

1. Insurance
2. Health, Safety, Quality & Environmental Management
3. Project Details and References

MERCURY

Hello Lolly Gilmore,

Please fill out the listed questionnaires and return them by the specified dates. These questionnaires are necessary to complete the Consultant Pre-Qualification process. Thank you for taking the time to respond to each one.

Process Overview
Process: Consultant Pre-Qualification
Category: Building and Construction Machinery and Accessories
Region: Ireland
Business unit: Data Centre & Building Services 1
Material: Not applicable
Process owner: Gillian Giblin
Message:

Questionnaire Overview

Name	Assigned To	Respond By
Insurance Certificates Questionnaire	Lolly Gilmore	January 20, 2023 at 1:55 PM
(LAB-CON) Health, Safety, Quality & Environmental Management Questionnaire	Lolly Gilmore	January 20, 2023 at 1:55 PM
Project Details and References Questionnaire	Lolly Gilmore	January 20, 2023 at 1:55 PM

Click Here to view the process.

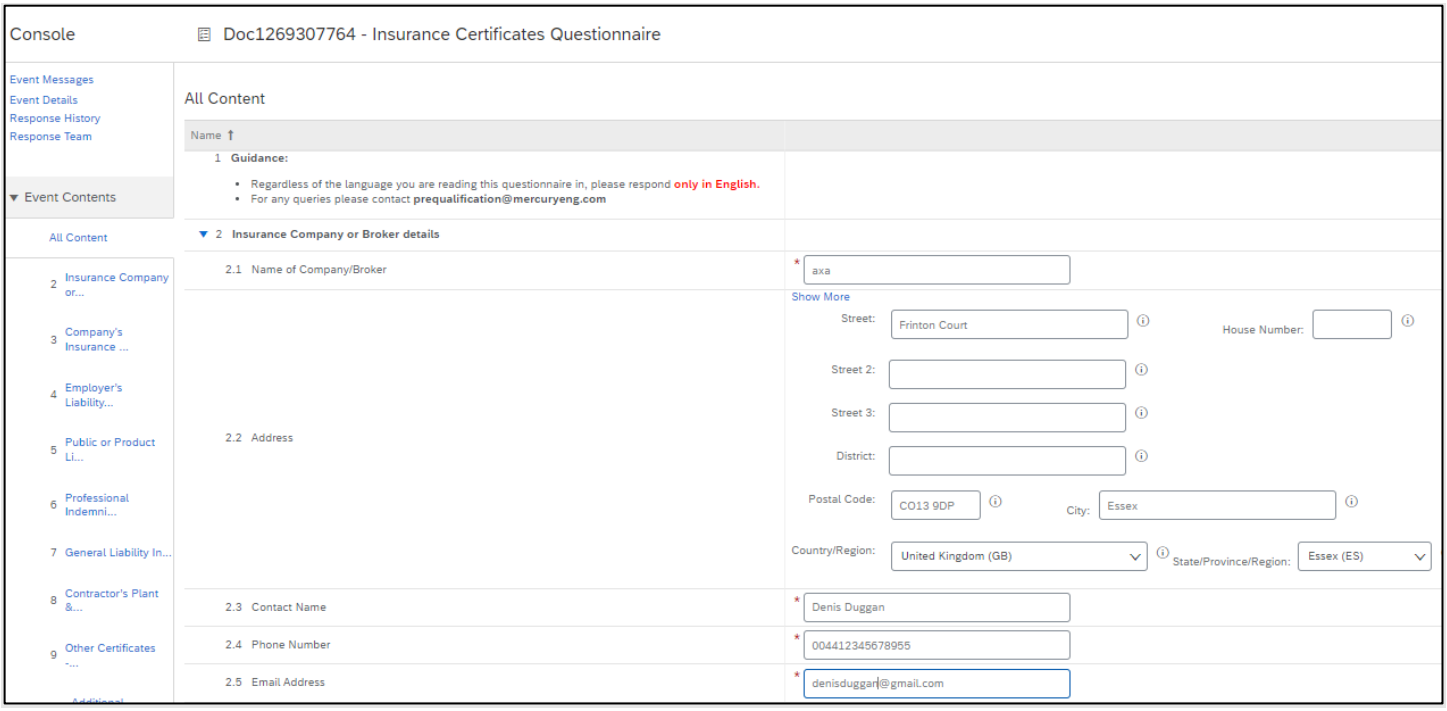
Best Regards,
SAP Ariba team

Step 1: Supplier Insurances Certificate Questionnaire

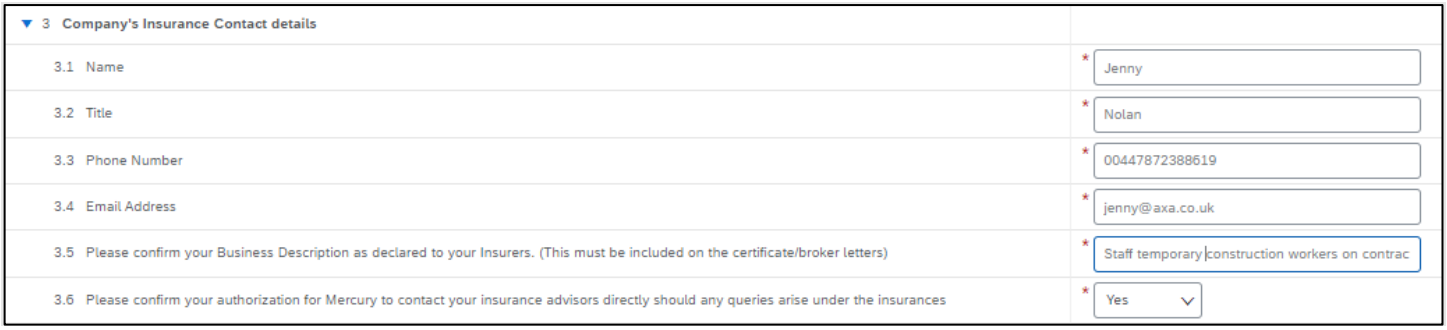
Your company may not have all the types of insurance asked for in this questionnaire. They are not necessarily required depending on your business. The main items we will be seeking confirmation on are the following:

- Your insured business description adequately covers your scope of work/services with Mercury.
- Indemnity insurance limits comply with those set out in our minimum terms and conditions.
- Ensuring you have adequate territorial and jurisdiction limits under your policies.
- The insurances are current, and a broker/insurer cert is provided.

If the insurances are non-compliant with any of the above or information is not provided, we will be seeking additional information before we can approve.



- **Name of Company/Broker:** input the name of your insurance company.
- **Address, Contact, Phone Number and Email Address**: of the insurance company.



- **Company's Insurance Contact Details**:

  Insert the **Name**, **Title**, **Phone Number** and **Email Address** of the insurance company contact you have been in contact with.

- **Please confirm your Business Description as declared to your Insurers.** Insert the same description as provided on your insurance.
- **Please confirm your authorization to contact your insurance advisors directly should any queries arise under the insurances.** Choose Yes.

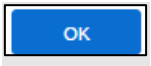
Employers Liability Insurance or Workers Compensation:

- **Do you have Employer's Liability Insurance / Workers Compensation?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click 

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Employer's Liability Insurance certificate specific to a separate country?** Yes or No.

Public or Product Insurance:

- **Do you have Public / Product Liability Insurance?** Choose Yes/No.

Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Public Liability Insurance certificate specific to a separate country?** Yes or No.

Professional Indemnity Insurance:

- **Do you have Professional Indemnity Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

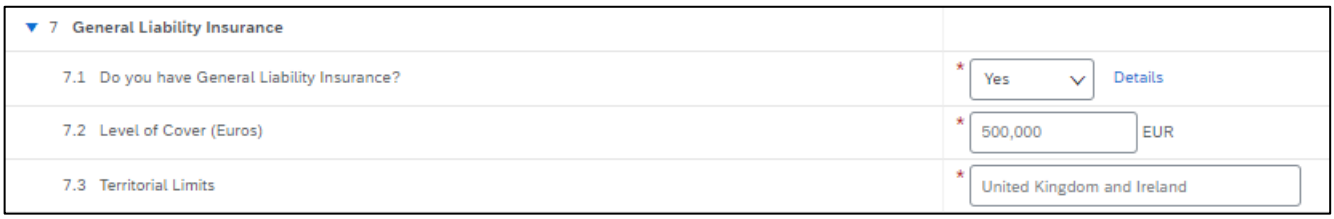
- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Professional Indemnity Insurance certificate specific to a separate country?** Yes or No.

General Liability Insurance:



- **Do you have General Liability Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.

Contractor's Plant & Equipment "All Risks" Insurance:

- **Do you have Contractor's Plant & Equipment "All Risks" Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

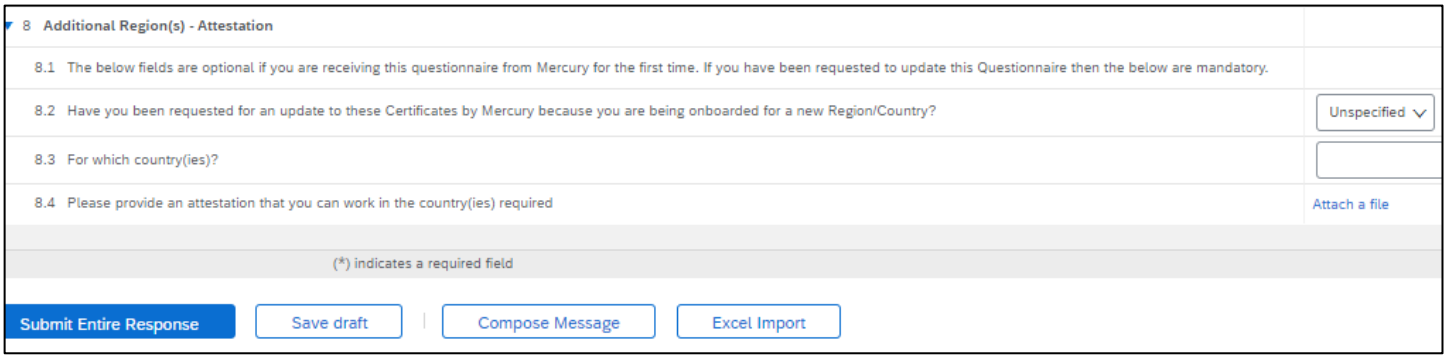
- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.

Other Certificates:

- **Do you have a Motor Insurance certificate?**
  - Choose Yes/No.This is not mandatory.

    Click Details to upload a copy of the certificate.

Additional Region(s) – Attestation

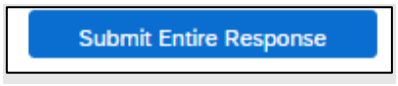


The below fields are optional if you are receiving this questionnaire from Mercury for the first time.

If you have been requested to update this Questionnaire, then the below are mandatory.

- Choose Yes if Mercury have asked you to submit certificates for an additional country.
- Choose No if you are not applying to work in additional countries.

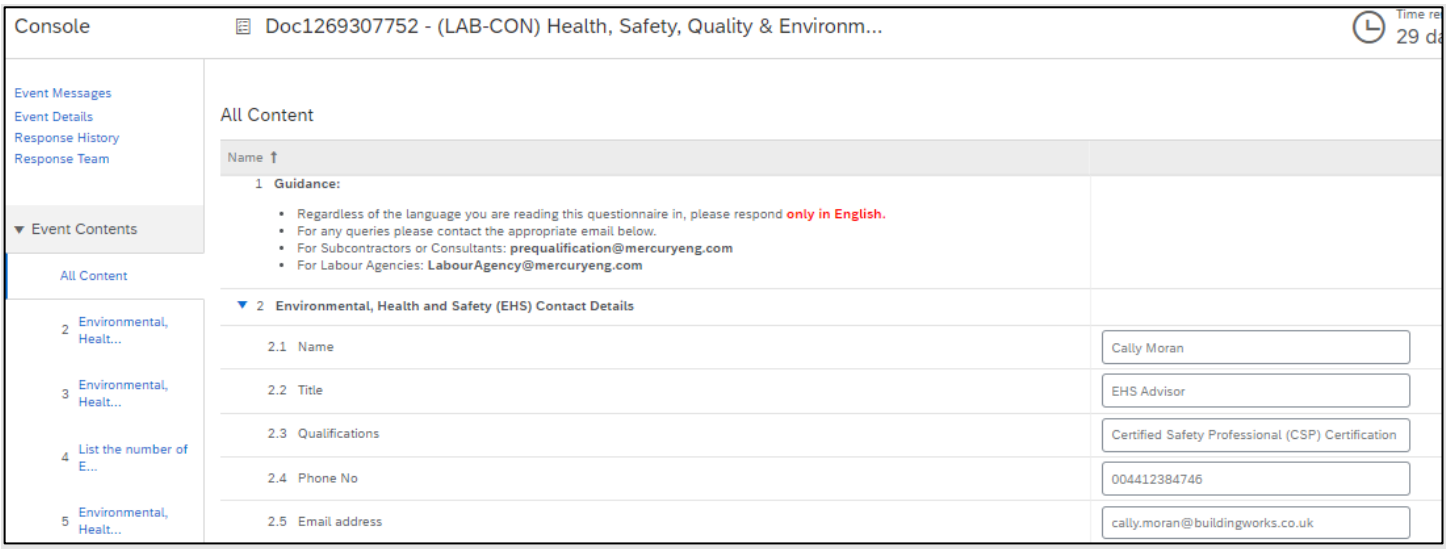
- Choose Attach a file if you need to show proof to work in another country.

Click 

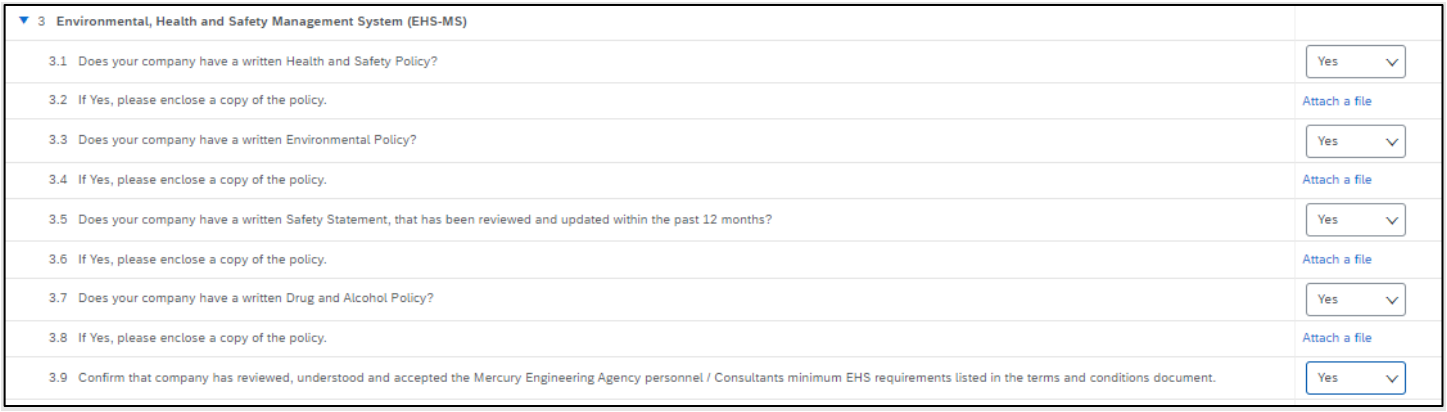
Click **OK**.

Step 2: Health, Safety, Quality, & Environmental Management Questionnaire

This form requires your EHS details. We will be reviewing your safety statement, health safety policy and risk assessment.



- **EHS Contact details**
  - **Name**: who is your EHS contact?
  - **Title**: what is their job role?
  - **Qualifications**: what are their qualifications or certifications for the position?
  - **Phone Number**: what is their number?
  - **Email address**: what is their email?



- **Environmental. Health and Safety Management System (EHS MS)**
  - **Does your company have a written Health and Safety policy?**
    If yes, please enclose a copy - Click Attach a file to upload.
  - **Does your company have a written Environmental policy?**
    If yes, please enclose - Click Attach a file to upload.

- **Does your company have a Safety Statement that has been reviewed and updated in the last 12 months?**
  If yes, please enclose - Click Attach a file to upload.

- **Does your company have a drug and alcohol policy?**
  If yes, - Click Attach a file to upload.

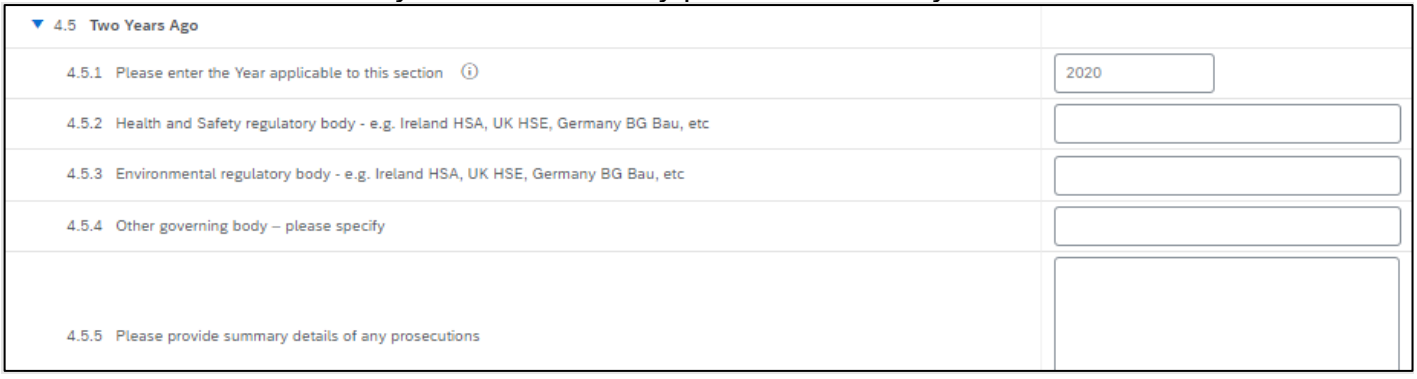
- **Confirm that company has reviewed, understood, and accepted the Mercury Engineering Agency personnel / Consultants minimum EHS requirements linked in the terms and conditions document.**
  Choose Yes or No.

<u>List the number of Environmental, Health and Safety prosecutions by any governing body, whether in the company's base country or elsewhere:</u>

- **Advise whether the Company, or its officers or Directors, current or former, have received Statutory Notices by relevant Regulatory Body or other enforcing body, in the last 5 years.**
  Choose *Yes* or *No*.
  If Yes, please provide details.

<u>List the Company statistics as follows:</u>
<u>Last year:</u>

- Provide details of any Health and Safety prosecutions last year.



Two years Ago:

- Provide details of any Health and Safety prosecutions two years ago.

Three years Ago:

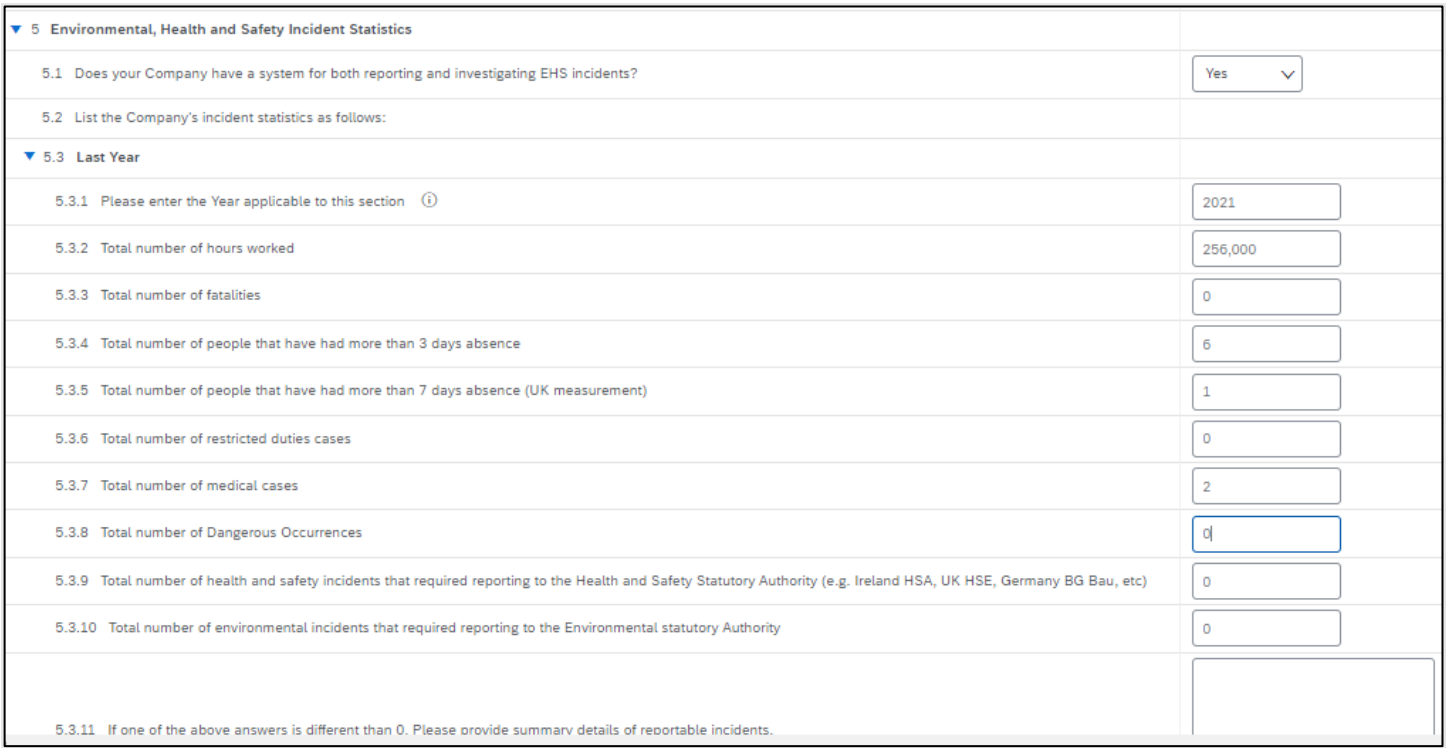
- Provide details of any Health and Safety prosecutions three years ago.

Four years Ago:

- Provide details of any Health and Safety prosecutions four years ago.

Environmental Health and Safety Incident Statistics:

- **Does your company have a system for both reporting and investigating EHS incidents?** Choose Yes or No.

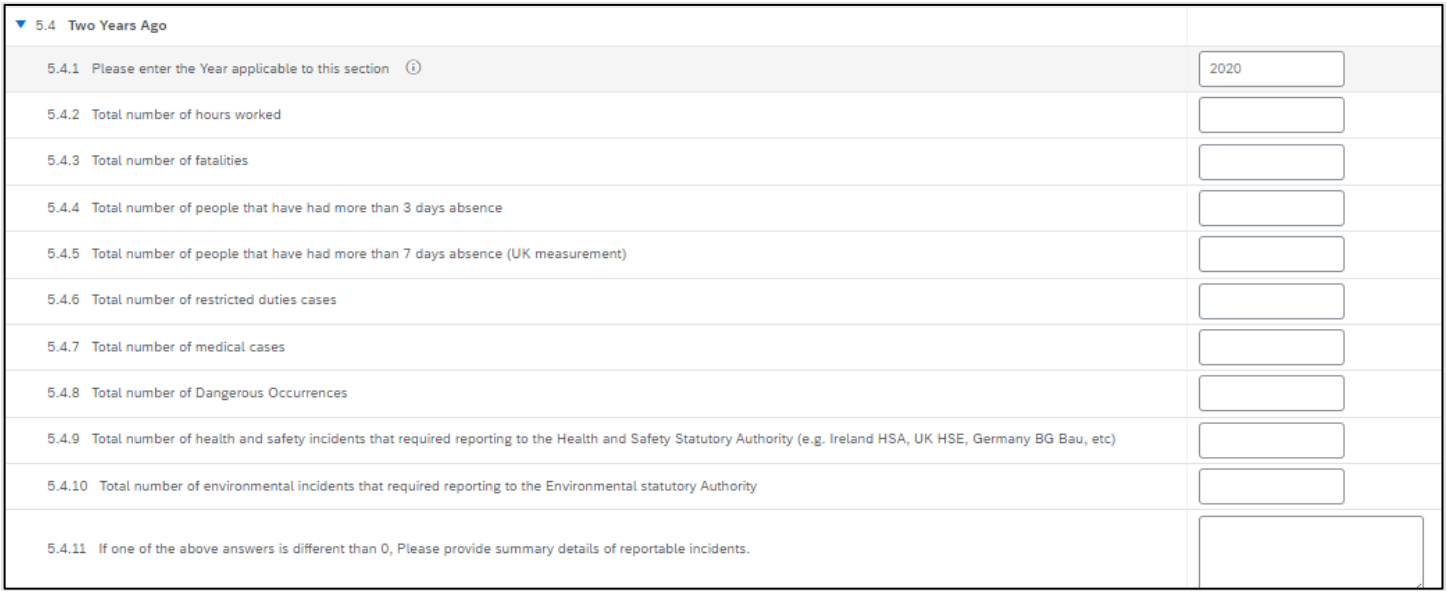


5 Environmental, Health and Safety Incident Statistics	
5.1 Does your Company have a system for both reporting and investigating EHS incidents?	Yes
5.2 List the Company's incident statistics as follows:	
5.3 Last Year	
5.3.1 Please enter the Year applicable to this section	2021
5.3.2 Total number of hours worked	256,000
5.3.3 Total number of fatalities	0
5.3.4 Total number of people that have had more than 3 days absence	6
5.3.5 Total number of people that have had more than 7 days absence (UK measurement)	1
5.3.6 Total number of restricted duties cases	0
5.3.7 Total number of medical cases	2
5.3.8 Total number of Dangerous Occurrences	0
5.3.9 Total number of health and safety incidents that required reporting to the Health and Safety Statutory Authority (e.g. Ireland HSA, UK HSE, Germany BG Bau, etc)	0
5.3.10 Total number of environmental incidents that required reporting to the Environmental statutory Authority	0
5.3.11 If one of the above answers is different than 0. Please provide summary details of reportable incidents.	

Last year:

List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.



▼ 5.4 Two Years Ago	
5.4.1 Please enter the Year applicable to this section ⓘ	2020
5.4.2 Total number of hours worked	
5.4.3 Total number of fatalities	
5.4.4 Total number of people that have had more than 3 days absence	
5.4.5 Total number of people that have had more than 7 days absence (UK measurement)	
5.4.6 Total number of restricted duties cases	
5.4.7 Total number of medical cases	
5.4.8 Total number of Dangerous Occurrences	
5.4.9 Total number of health and safety incidents that required reporting to the Health and Safety Statutory Authority (e.g. Ireland HSA, UK HSE, Germany BG Bau, etc)	
5.4.10 Total number of environmental incidents that required reporting to the Environmental statutory Authority	
5.4.11 If one of the above answers is different than 0, Please provide summary details of reportable incidents.	

Two years Ago:

List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Three years Ago:

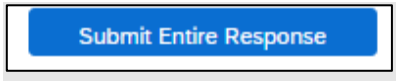
List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Four years Ago:

List the Company's incident statistics as follows:

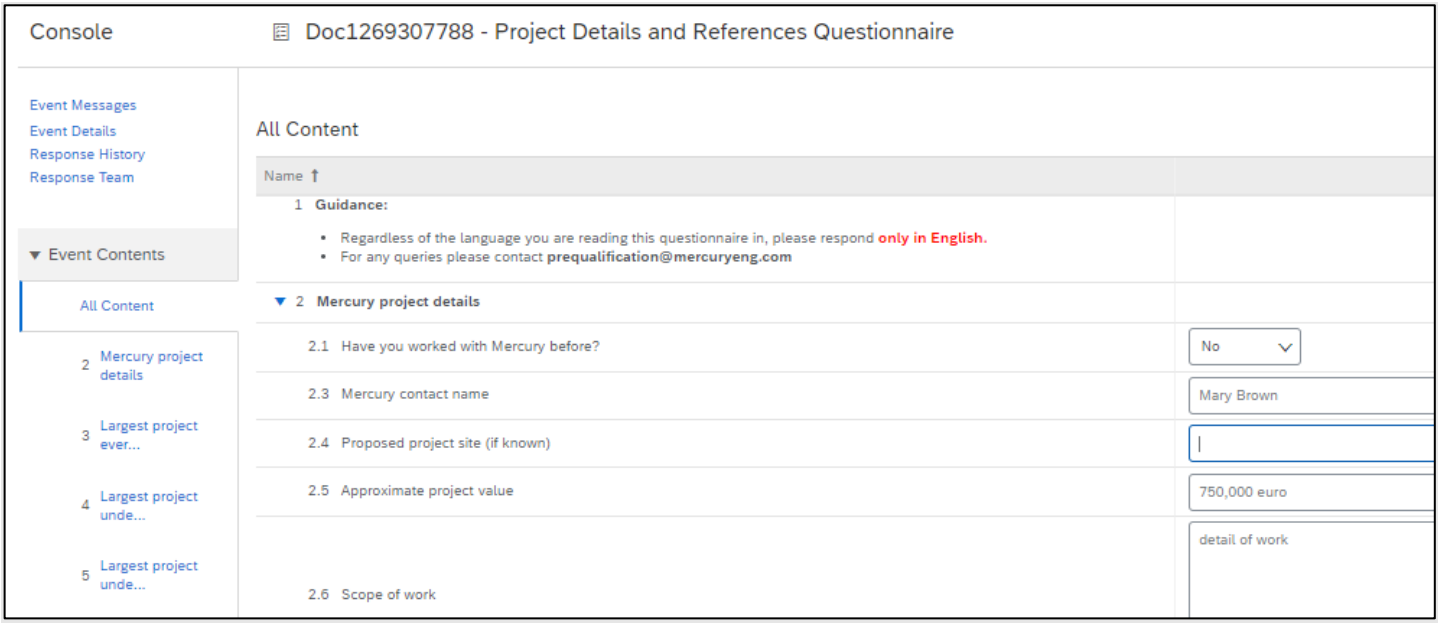
- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Click 

Click **OK**.

Step 3: Project Details and References Questionnaire

This form has questions regarding references. The questions are optional.
Please provide a brief description and submit your response.



- **Mercury project details**
  - **Please answer if you have worked with Mercury before.**
  - If so, who is your contact in Mercury?
  - **Do you know the name of the project site you will be working on?**
  - **Do you have an estimate of the project's value?**
  - **What is your scope of work?**

- **Largest project undertaken this year**
  - **Project name.**
  - **Location.**
  - **Client name.**
  - **Project value.**
  - **Year.**
  - **Your scope of work?**

- **Largest project undertaken last year**
  - **Project name.**
  - **Location.**
  - **Client name.**
  - **Project value.**
  - **Year.**
  - **Your scope of work?**

Click

and then click **OK**.

Labour Agency Vendor Pre-Qualification Questionnaires

Labour Agency vendors receive the following Questionnaires:

1. Insurance
2. Health, Safety, Quality & Environmental Management
3. Project Details and References

MERCURY

Hello Denis Duggan,

Please fill out the listed questionnaires and return them by the specified dates. These questionnaires are necessary to complete the Labour Agency Pre-Qualification process. Thank you for taking the time to respond to each one.

Process Overview
Process: Labour Agency Pre-Qualification
Category: Building and Construction Machinery and Accessories
Region: United Kingdom
Business unit: Data Centre & Building Services 1
Material: Not applicable
Process owner: Gillian Giblin
Message:

Questionnaire Overview

Name	Assigned To	Respond By
Insurance Certificates Questionnaire	Denis Duggan	January 20, 2023 at 8:32 AM
(LAB-CON) Health, Safety, Quality & Environmental Management Questionnaire	Denis Duggan	January 20, 2023 at 8:32 AM
Project Details and References Questionnaire	Denis Duggan	January 20, 2023 at 8:32 AM

Click Here to view the process.

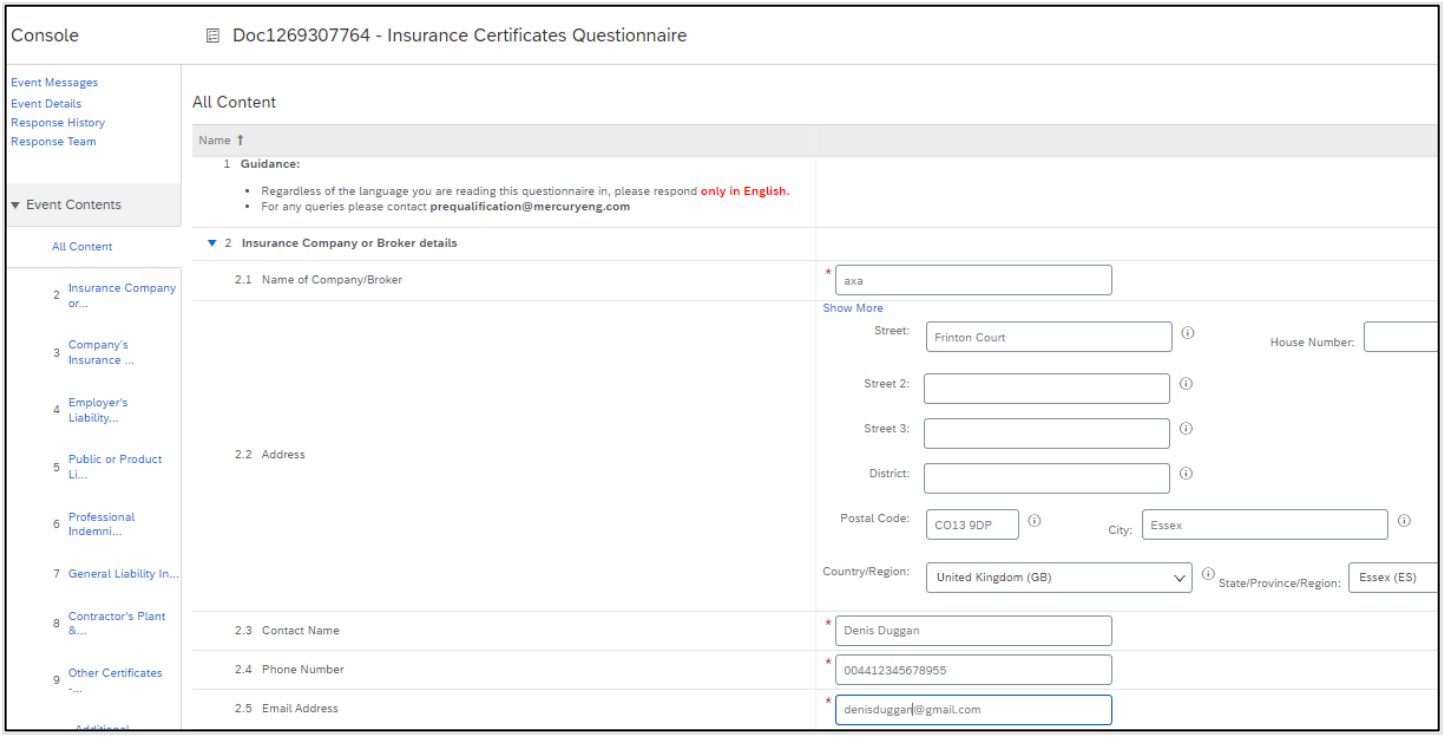
Step 1: Supplier Insurances Certificate Questionnaire

Your company may not have all the types of insurance asked for in this questionnaire. They are not necessarily required depending on your business.

The main items we will be seeking confirmation on are the following:

- Your insured business description adequately covers your scope of work/services with Mercury.
- Indemnity insurance limits comply with those set out in our minimum terms and conditions.
- Ensuring you have adequate territorial and jurisdiction limits under your policies.
- The insurances are current, and a broker/insurer cert is provided.

If the insurances are non-compliant with any of the above or information is not provided, we will be seeking additional information before we can approve.



- **Name of Company/Broker:** input the name of your insurance company.
- **Address, Contact, Phone Number and Email Address**: of the insurance company.

3 Company's Insurance Contact details	
3.1 Name	* Jenny
3.2 Title	* Nolan
3.3 Phone Number	* 00447872388619
3.4 Email Address	* jenny@axa.co.uk
3.5 Please confirm your Business Description as declared to your Insurers. (This must be included on the certificate/broker letters)	* Staff temporary construction workers on contrac
3.6 Please confirm your authorization for Mercury to contact your insurance advisors directly should any queries arise under the insurances	* Yes

- **<u>Company's Insurance Contact Details</u>**:
  - Insert the **Name**, **Title**, **Phone Number** and **Email Address** of the insurance company contact you have been in contact with.
  - **Please confirm your Business Description as declared to your Insurers.** Insert the same description as provided on your insurance.
  - **Please confirm your authorization to contact your insurance advisors directly should any queries arise under the insurances.** Choose Yes.

Employers Liability Insurance or Workers Compensation:

- **Do you have Employer's Liability Insurance / Workers Compensation?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Employer's Liability Insurance certificate specific to a separate country?** Yes or No.

Public or Product Insurance:

- **Do you have Public / Product Liability Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Public Liability Insurance certificate specific to a separate country?** Yes or No.

Professional Indemnity Insurance:

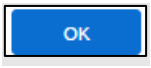
This is MANDATORY for all Labour Agency suppliers.

- **Do you have Professional Indemnity Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

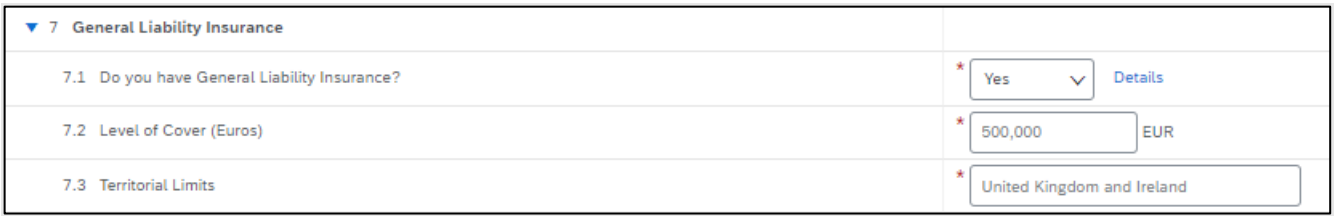
- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click 

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Professional Indemnity Insurance certificate specific to a separate country?** Yes or No.

General Liability Insurance:



- **Do you have General Liability Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click

to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.
- **Do you have an additional Professional Indemnity Insurance certificate specific to a separate country?** Yes or No.

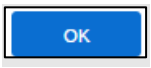
Contractor's Plant & Equipment "All Risks" Insurance:

- **Do you have Contractor's Plant & Equipment "All Risks" Insurance?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

You need to insert the certificate specific information, in a new window:

- **Issuer**, **Year of Publication**, **Certificate Number**, **Certificate Location**, **Effective Date** and **Expiration Date** are required fields.

Click 

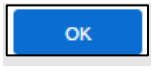
to return to the questionnaire.

- **Level of Cover: input** the level of cover in euro.
- **Territorial Limits: input** the countries which are covered.

Other Certificates:

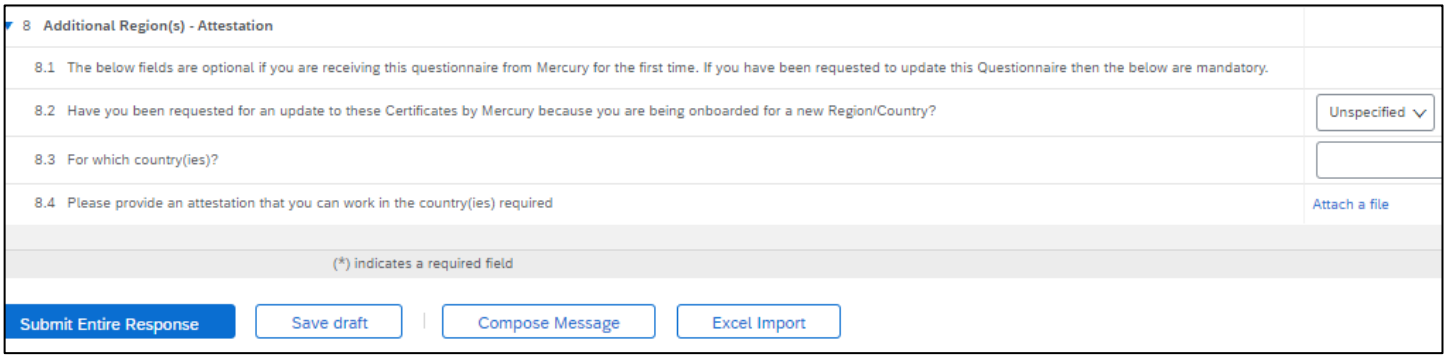
- **Do you have a Motor Insurance certificate?**
  - Choose Yes/No.

    Click Details to upload a copy of the certificate.

Click 

to return to the questionnaire.

Additional Region(s) – Attestation

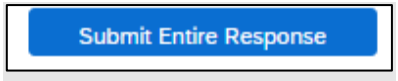


These next fields are optional if you are receiving this questionnaire from Mercury for the first time.

If you have been requested to update this Questionnaire, then the below are mandatory.

- Choose Yes if Mercury have asked you to submit certificates for an additional country.
- Choose No if you are not applying to work in additional countries.

- Choose Attach a file if you need to show proof to work in another country.

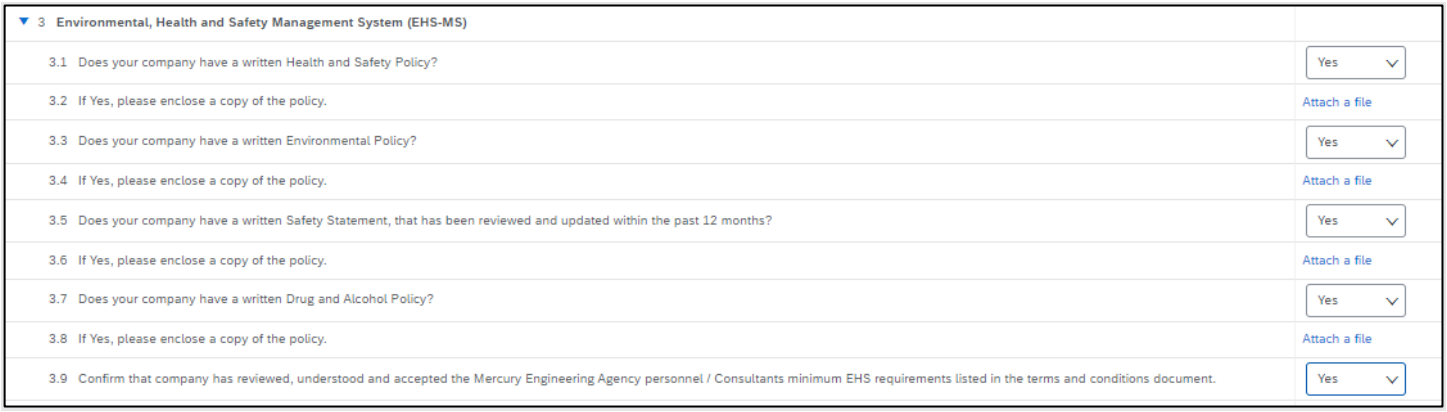
Click 

Click **OK**.

Step 2: Health, Safety, Quality, & Environmental Management Questionnaire

This form requires your EHS details. We will be reviewing your safety statement, health safety policy and risk assessment.

- **EHS Contact details**
  - **Name**: who is your EHS contact?
  - **Title**: what is their job role?
  - **Qualifications**: what are their qualifications or certifications for the position?
  - **Phone Number**: what is their number?
  - **Email address**: what is their email?



- **Environmental. Health and Safety Management System (EHS MS)**
  - **Does your company have a written Health and Safety policy?**
  - If yes, please enclose a copy - Click Attach a file to upload.
  - **Does your company have a written Environmental policy?**
  - If yes, please enclose - Click Attach a file to upload.

- **Does your company have a Safety Statement that has been reviewed and updated in the last 12 months?**
- If yes, please enclose - Click Attach a file to upload.

- **Does your company have a drug and alcohol policy?**
- If yes, - Click Attach a file to upload.

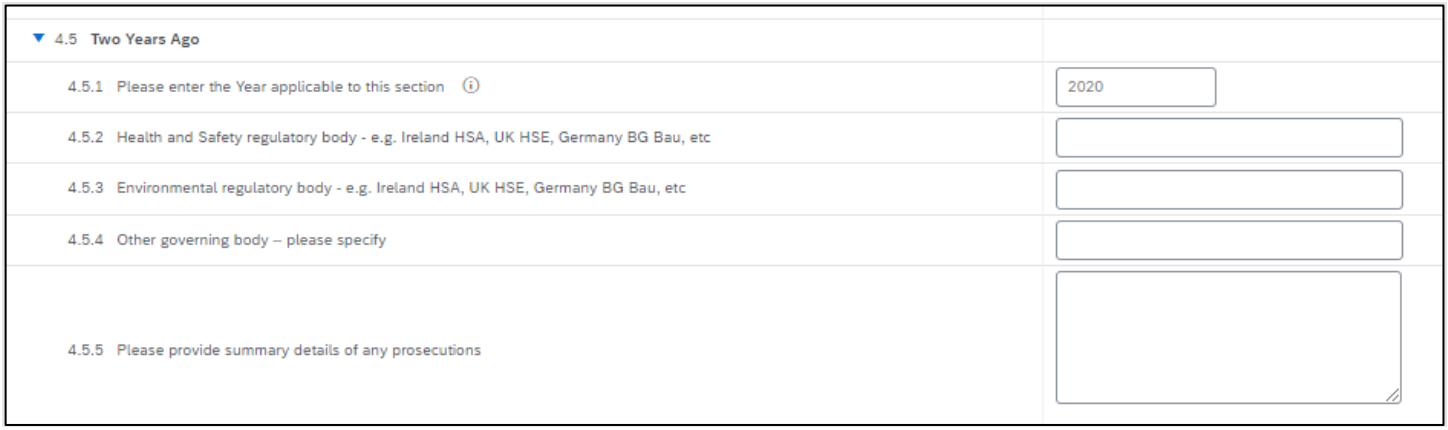
- **Confirm that company has reviewed, understood, and accepted the Mercury Engineering Agency personnel / Consultants minimum EHS requirements linked in the terms and conditions document.**
  Choose Yes or No.

<u>List the number of Environmental, Health and Safety prosecutions by any governing body, whether in the company's base country or elsewhere:</u>

- **Advise whether the Company, or its officers or Directors, current or former, have received Statutory Notices by relevant Regulatory Body or other enforcing body, in the last 5 years.**
  Choose Yes or No.
  If Yes, please provide details.

<u>List the Company statistics as follows:</u>
<u>Last year:</u>

- Provide details of any Health and Safety prosecutions last year.



Two years Ago:

- Provide details of any Health and Safety prosecutions two years ago.

Three years Ago:

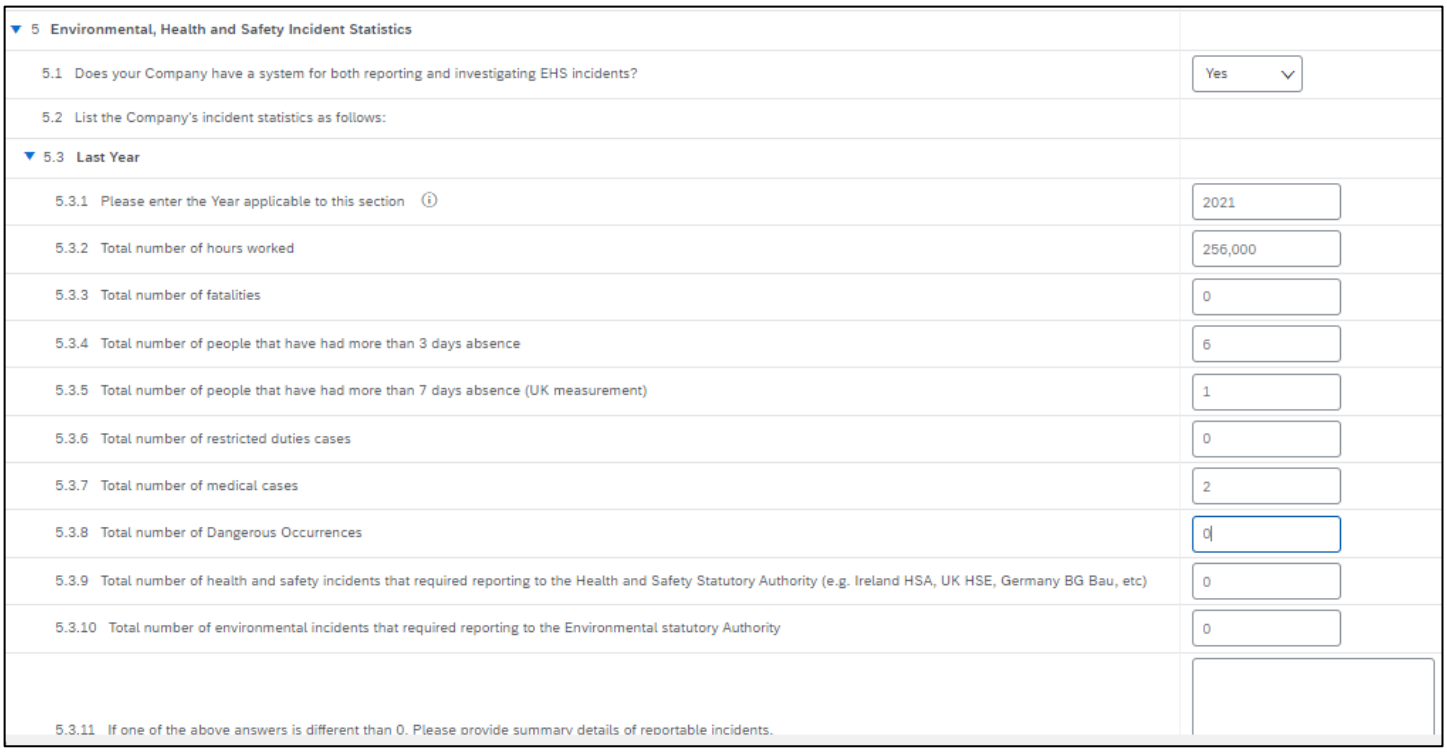
- Provide details of any Health and Safety prosecutions three years ago.

Four years Ago:

- Provide details of any Health and Safety prosecutions four years ago.

Environmental Health and Safety Incident Statistics:

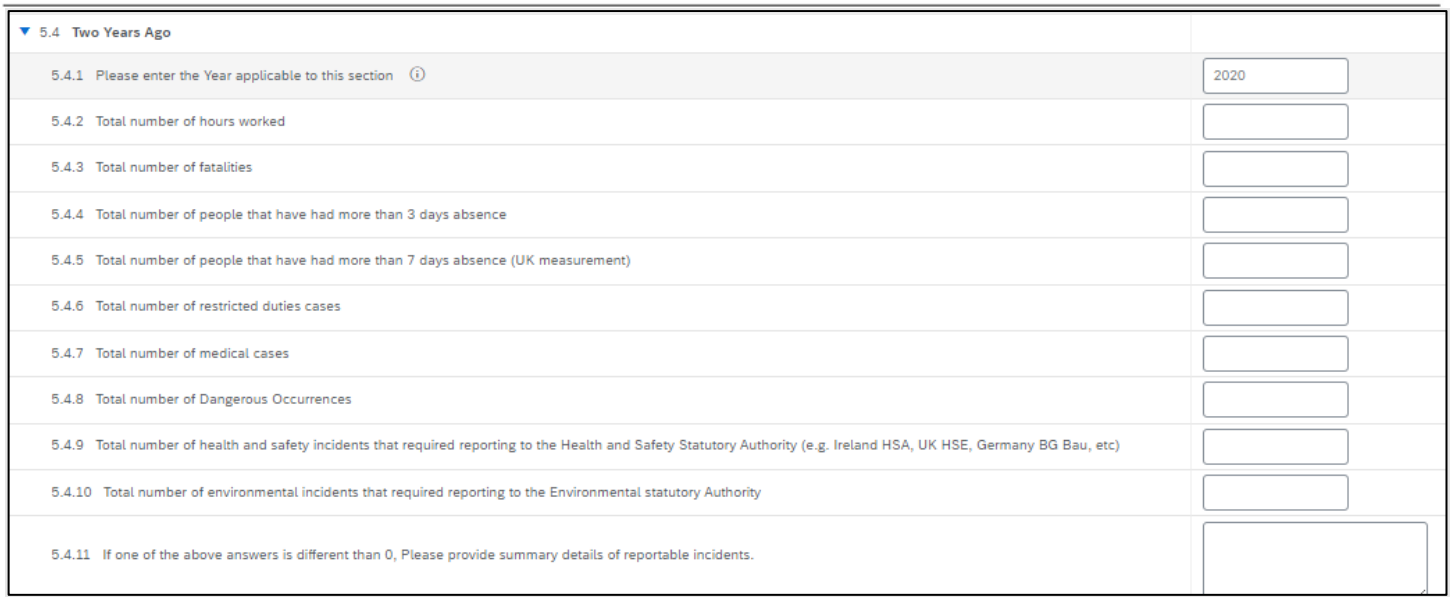
- **Does your company have a system for both reporting and investigating EHS incidents?** Choose Yes or No.



Last year:

List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.



5.4 Two Years Ago	
5.4.1 Please enter the Year applicable to this section	2020
5.4.2 Total number of hours worked	
5.4.3 Total number of fatalities	
5.4.4 Total number of people that have had more than 3 days absence	
5.4.5 Total number of people that have had more than 7 days absence (UK measurement)	
5.4.6 Total number of restricted duties cases	
5.4.7 Total number of medical cases	
5.4.8 Total number of Dangerous Occurrences	
5.4.9 Total number of health and safety incidents that required reporting to the Health and Safety Statutory Authority (e.g. Ireland HSA, UK HSE, Germany BG Bau, etc)	
5.4.10 Total number of environmental incidents that required reporting to the Environmental statutory Authority	
5.4.11 If one of the above answers is different than 0, Please provide summary details of reportable incidents.	

Two years Ago:

List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

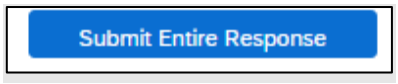
Three years Ago:

List the Company's incident statistics as follows:

- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Four years Ago:
List the Company's incident statistics as follows:

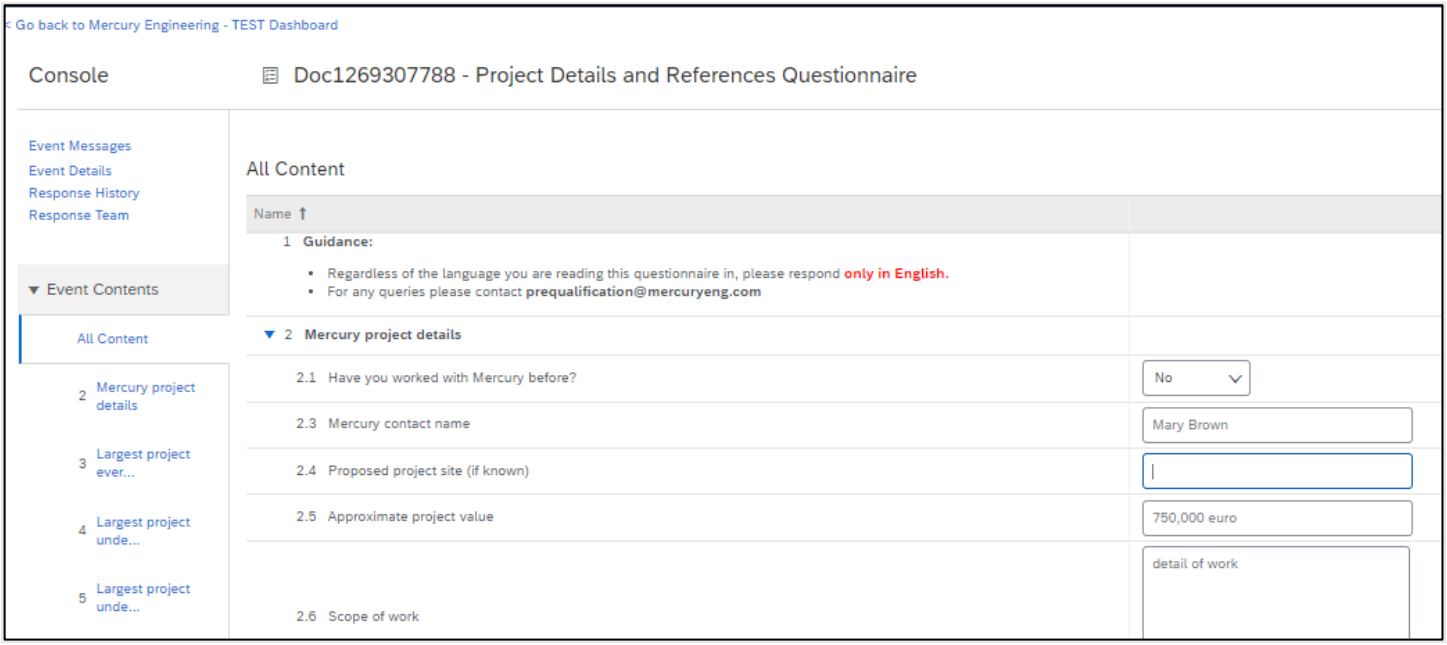
- Total number of hours worked
- Total number of fatalities
- Total number of people that have had more than 3 days absence
- Total number of people that have had more than 7 days absence (UK measure)
- Total number of restricted duties cases
- Total number of medical cases
- Total number of Dangerous Occurrences
- Total number of health and safety incidents that required reporting to H+S Authority
- Total number of environmental incidents that required reporting to Environmental statutory Authority
- If one of the above is different than 0, please provide details of reportable incidents.

Click 

Click **OK**.

Step 3: Project Details and References Questionnaire

This form has questions regarding references. The questions are optional.
Please provide a brief description and submit your response.



- **Mercury project details**
  - **Please answer if you have worked with Mercury before.**
  - If so, who is your contact in Mercury?
  - **Do you know the name of the project site you will be working on?**
  - **Do you have an estimate of the project's value?**
  - **What is your scope of work?**

- **Largest project undertaken this year**
  - **Project name.**
  - **Location.**
  - **Client name.**
  - **Project value.**
  - **Year.**
  - **Your scope of work?**

- **Largest project undertaken last year**
  - **Project name.**
  - **Location.**
  - **Client name.**
  - **Project value.**
  - **Year.**
  - **Your scope of work?**

Click

and click **OK**.

FAQs

Why would a Questionnaire be resent?

If you do not complete all the relevant information, or if you are required to submit additional country specific details, then the Questionnaire may be resent to you.

The most common problem is missing or incorrect tax or bank information.

How to I check the Status of my Account?

You will receive email updates when your registration or questionnaires have been approved.
You will receive an email when the account is fully qualified.

What happens if my invite or questionnaires link expires?

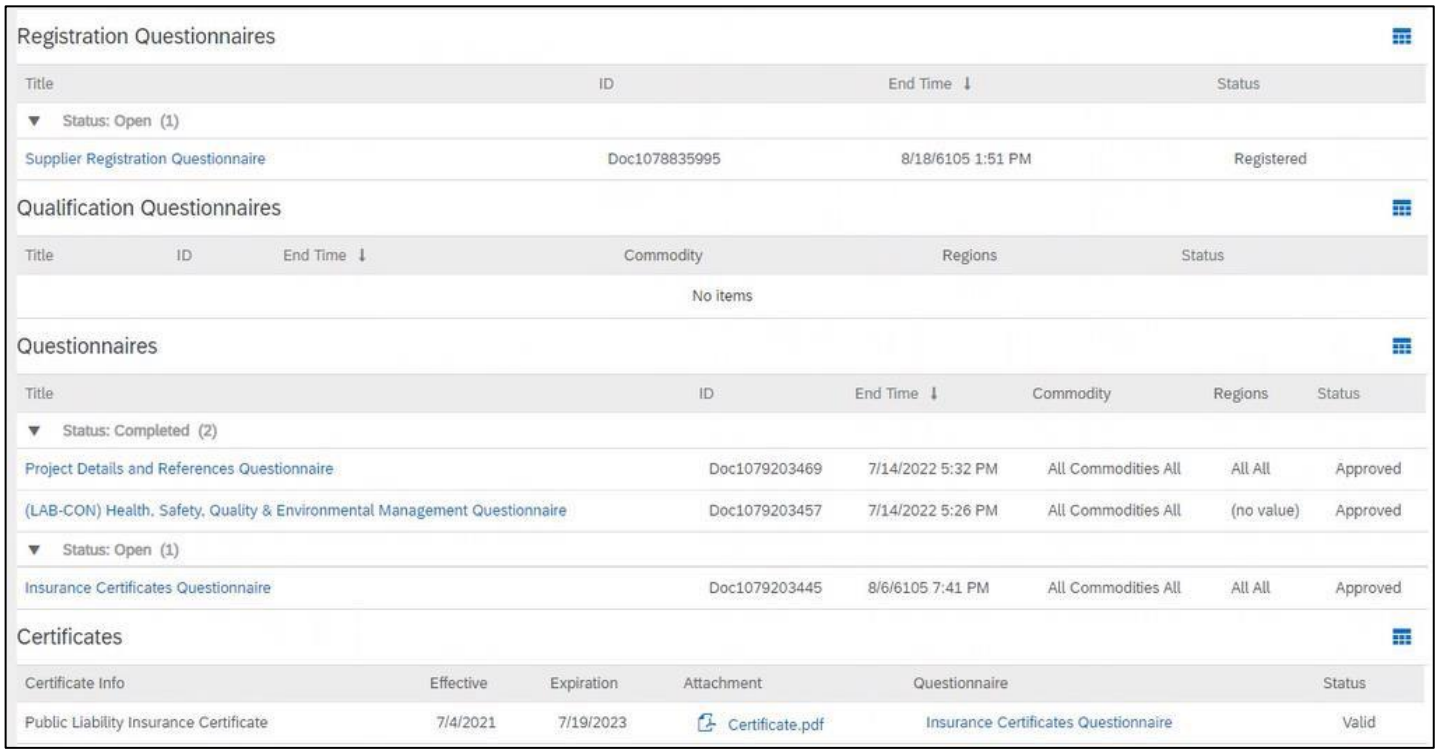
The invitation or questionnaires links will not expire for 60 days, from when they are sent.
You will receive a reminder every 7 days to complete the tasks.
If 60 days passes and the link expires – contact the Vendor Mnager who has been assigned to your account You can check who this person is from your correspondence and profile.

What happens if my insurance expires?

You will be notified when your insurance expiration is approaching. You need to resubmit your new insurance certificates on your Ariba profile yourself.

Have you been invited to resubmit your insurance certificates?

1. Please follow the invitation link to log in to your Ariba profile.
2. In the **Registration Questionnaires**, you will see the **Certificates** section towards the bottom of the list.
3. Select the **Attachment** link to upload your new certificate.



Registration Questionnaires

Title	ID	End Time	Status
Status: Open (1)			
Supplier Registration Questionnaire	Doc1078835995	8/18/6105 1:51 PM	Registered

Qualification Questionnaires

Title	ID	End Time	Commodity	Regions	Status
No items					

Questionnaires

Title	ID	End Time	Commodity	Regions	Status
Status: Completed (2)					
Project Details and References Questionnaire	Doc1079203469	7/14/2022 5:32 PM	All Commodities All	All All	Approved
(LAB-CON) Health, Safety, Quality & Environmental Management Questionnaire	Doc1079203457	7/14/2022 5:26 PM	All Commodities All	(no value)	Approved
Status: Open (1)					
Insurance Certificates Questionnaire	Doc1079203445	8/6/6105 7:41 PM	All Commodities All	All All	Approved

Certificates

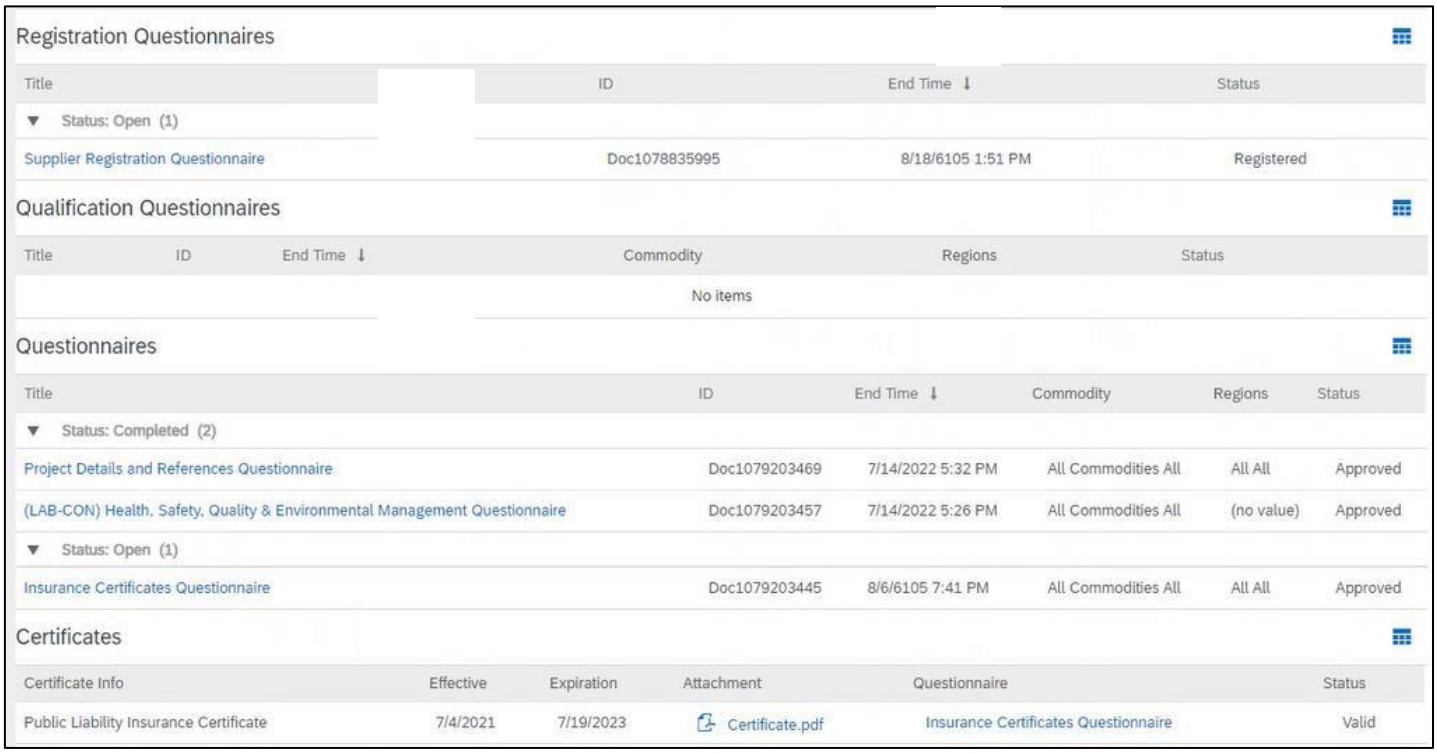
Certificate Info	Effective	Expiration	Attachment	Questionnaire	Status
Public Liability Insurance Certificate	7/4/2021	7/19/2023	Certificate.pdf	Insurance Certificates Questionnaire	Valid

Updating your Company Details

If your company information changes, it is your responsibility to update your information in your Ariba profile. It is important to ensure correct information, such as bank details, so that we can pay invoices on time, and that insurance certificates are kept up to date and not left to expire.

Please note that Mercury is not able to make any changes to your account.

1. You will receive Ariba emails notifying you of updates in the process and if additional information is required.
2. Follow the link to be taken to the correct screen.
3. If the updates relate to Bank, Insurance, TAX or Contact details:
   Select a **Questionnaires** link to make the changes.



Registration Questionnaires

Title	ID	End Time	Status
Status: Open (1)			
Supplier Registration Questionnaire	Doc1078835995	8/18/6105 1:51 PM	Registered

Qualification Questionnaires

Title	ID	End Time	Commodity	Regions	Status
No items					

Questionnaires

Title	ID	End Time	Commodity	Regions	Status
Status: Completed (2)					
Project Details and References Questionnaire	Doc1079203469	7/14/2022 5:32 PM	All Commodities All	All All	Approved
(LAB-CON) Health, Safety, Quality & Environmental Management Questionnaire	Doc1079203457	7/14/2022 5:26 PM	All Commodities All	(no value)	Approved
Status: Open (1)					
Insurance Certificates Questionnaire	Doc1079203445	8/6/6105 7:41 PM	All Commodities All	All All	Approved

Certificates

Certificate Info	Effective	Expiration	Attachment	Questionnaire	Status
Public Liability Insurance Certificate	7/4/2021	7/19/2023	Certificate.pdf	Insurance Certificates Questionnaire	Valid

Who can I contact for more information?

If you require any additional support, contact us at:

- supplier.onboarding@mercuryeng.com for Material vendors
- subcontractor.onboarding@mercuryeng.com for Subcontractor and Consultancy vendors
- labourAgency@mercuryeng.com for Labour Agency vendors

If you are already approved with another company in SAP ARIBA, do you still need to register with Mercury?

SAP Ariba does not share supplier's registration information between different companies. Suppliers that were previously registered on SAP Ariba and are not registered with Mercury must separately submit the Mercury supplier registration questionnaires.

You can use the same log-in details.

How do I get notifications?

Email notifications will be sent to your contact person. The primary contact person will receive all status updates, notifications, or also SAP official notifications based on the email used at the time of registration.

What if the invite is sent to the wrong person?

You can forward the link to another person if you want to share the log-in details.

If the default contact needs to be updated:

You can contact the Vendor Manager mentioned on the Mercury invitation to resend the invite. Update your profile details with this change also.

What is the process if you do not receive email notification for registration?

Suppliers who fail to receive SAP Ariba SLP invitations or email notifications should contact:

- supplier.onboarding@mercuryeng.com for Material vendors
- subcontractor.onboarding@mercuryeng.com for Subcontractor and Consultancy vendors
- labourAgency@mercuryeng.com for Labour Agency vendors

The Mercury Support team will be able to re-trigger the invitation and email notifications as required. Please also check if the invitation email has potentially been moved to your SPAM folder.

I received an unexpected error

The unexpected error can occur when:

- Multiple browser windows with Ariba pages are opened
- Multiple users are connected to the same account
- Previous session is not logged out properly, and a new session is opened
- Expired link (for example, from password reset email) is used to log in

To Resolve the issue:

1. Delete cookies and browsing history of your Internet browser.
2. Close all browser windows.
3. Open a new browser window and try to log in to your account.

Why does the link not work?

If you cannot click the link, or the link does not open the log in page, highlight and copy the Uniform Resource Locator (URL), and then paste the URL into your web browser.

Clearing the cache/browsing data should fix the problem.

Why do I see a blank pop-up box when attempting to open the Questionnaire?

Something in the browser is blocking the content from loading the questionnaire content. You have a couple options to resolve this issue:

- Check to see if an ad blocker is installed, such as AdBlock Plus OR uBlock. If there is, disable or pause it and load the page again
- Try to log in using a different browser

In Google Chrome, ad blockers are typically located in the Extensions section.

How do I delete/clear my browser recent history, cookies, or cache?

We recommend deleting your browser's temporary Internet files, cookies, cache, and history regularly to ensure a smooth experience.

If you are using Microsoft Internet Explorer:

- Click **Tools** in the upper left corner of your browser window. (If you cannot see the **Tools** option, right-click the top of your browser window and select the **Menu bar** to make it visible)
- Click **Internet Options**
- Click **Delete** under the **General** tab under **Delete Browsing History**
- Make sure **Cookies** and **Temporary Internet Files** are checked
- Click **Delete**
- After the browser finishes deleting your history, log out of Ariba and close your browser.
- Open Internet Explorer again

If you are using Mozilla Firefox:

- Click **History**
- Click **Clear Recent History**
- In the pop-up box, make sure **Cookies**, **Cache**, and **Active Logins** are checked
- Click **Clear Now**
- After the browser finishes deleting your history, log out of Ariba and close your browser
- Open Mozilla Firefox again

If you are using Google Chrome:

- Click the icon in the upper right corner that has three stacked horizontal lines (☰).
- Click **More Tools**
- Click **Clear Browsing Data**
- Next to **Obliterate the following items from**, choose **the beginning of time**
- Make sure **Cookies and other Site and Plug-in Data**, and **Cache Images and Files** are checked
- Click **Clear Browsing Data**
- After the browser finishes deleting your history, log out of Ariba and close your browser
- Open Google Chrome again
- Access browser's recent history press and hold Ctrl + Shift + Del keys on your keyboard. Then, you can remove the files according to the steps for your browser.