LOCAL BENEFITS

(SOCIAL, ECONOMIC AND ENVIRONMENTAL)

| | Apprent Please in | offer apprenticeships/training ciceships/training opportunition andicate whether the company of ceship or training opportunities | e s fers app | rentice | eships or training opport | |
|--------|--|---|------------------------|-----------|--|------------------------|
| NUMBER | <u>NAME</u> | | NON BERMUDIAN | BERMUDIAN | APPRENTICESHIPS OFFERED BY YOUR (month/year) | OR TRAINING COMPANY |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Number of employees/Bermudians Please indicate the total number of persons employed by the company and the number a percentage of Bermudian employees. NUMBER OF NON-BERMUDIANS: NUMBER OF BERMUDIANS: PERCENTAGE OF BERMUDIANS: | | | | | |
| | | | | | | |

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OPMP/2019/S/003

Annex C

| Will the proponent use local businesses in their supply chain? | |
|---|-----|
| Yes No | |
| If no, then please provide an explanation | |
| Will the proponent use local sub-contractors (if applicable)? | |
| Yes No | |
| If no, then please provide an explanation | |
| Safety, Health and Environmental Policies | |
| Please indicate whether the company has a (i) safety and health policy, (ii) sustainable god and/or services policy, and/or (iii) an environmental policy. If so, then please provide a copy. | ods |
| Copy attached Yes No | |
| Provide a copy of the proponent's Certificate of Incorporation (if applicable) | |

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