Danaos Supplier Audit Form

Purpose. Use this form to document a consistent, evidence-based assessment of a supplier. Complete every criterion, attach supporting evidence where available, and record the overall recommendation at the end of the form.

Supplier name	_____
Evaluation date	_____
Evaluator name and title	_____
Business unit / project	_____

Scoring scale

1	2	3	4	5
Does not meet	Partially meets	Meets requirements	Exceeds requirements	Outstanding

The evaluation criteria table is filled in by the Danaos auditor. Supplier to provide available evidence/supporting data as requested.

Evaluation criteria

No.	Evaluation criterion	Assessment guidance	Score 1–5	Comments and evidence
1	**Standard of equipment**	Suitability, condition, capacity, safety, technology, maintenance, and availability of equipment. Pls advise applicable certifications and standards for your equipment/services and provide relevant evidence if available.	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
2	**Standard of staff**	Qualifications, experience, competence, staffing levels, supervision, and continuity of key personnel. Pls advise the number of employees, the organization chart and qualifications of key personnel	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
3	**Integrity and responsibility**	Ethical conduct, transparency, ownership of obligations, references, and responsible business practices. Does the company follow a Code of Conduct based on ethical business principles, applicable laws and recognized industry standards? In case yes, kindly provide relevant evidence	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
4	**Quality of work**	Quality-management approach, workmanship, inspection, corrective action, and evidence of past performance. What quality-management system do you use? Is the system certified to ISO 9001 or another recognized standard?	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
5	**Financial position**	Financial stability, liquidity, credit worthiness, insurance, and capacity to sustain the contract. Kindly provide evidence of financial and operational stability.	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____

No.	Evaluation criterion	Assessment guidance	Score 1–5	Comments and evidence
6	**Compliance with labor laws**	Compliance with applicable labor, employment, health and safety, wage, and working-time requirements. Do you comply with all applicable labor, employment, health and safety, wage and working-time laws? Can you provide relevant evidence?	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
7	**Incident logs**	Are accidents, near misses and occupational illnesses recorded and investigated? Are corrective actions considered? If yes, kindly provide relative evidence	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
8	**Environmental Policy**	Is there an environmental policy approved by management in place? In case yes, please provide relevant evidence	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
9	**Social policy**	Is there a labor, human-rights or social-responsibility policy in place? If yes, please provide relevant evidence	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____
10	**Anti-bribery policy**	Are bribery, corruption, facilitation payments and fraud prohibited? Is there a policy in place? Pls provide relevant evidence	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	_____ _____ _____ _____

Summary and recommendation

Total score	_____ / 50		
Key strengths	_____ _____		
Key risks or gaps	_____ _____		
Overall recommendation	☐ Proceed to next stage ☐ Proceed with conditions ☐ Do not proceed		
Evaluator signature	_____	**Date**	_____
Approver name and title	_____	**Date**	_____