

The ATCO logo consists of the letters 'ATCO' in a bold, white, sans-serif font. Below the text is a thick, horizontal orange bar that tapers at both ends, resembling a stylized underline or a swoosh.

ATCO

Register Supplier: HOW-TO GUIDE

for New Suppliers

Version 1.2 March 2024

FOR NEW SUPPLIERS

Navigate to Home Page ↓



Navigation guide at the top to show which stage of the module you are currently on

Register Supplier: Company Details

Enter a value for at least one of these fields: D-U-N-S Number, Taxpayer ID, or Tax Registration Number.

* Company

* Tax Organization Type

Supplier Type

Corporate Web Site

Your Contact Information

Enter the contact information for communications regarding this registration.

* First Name

* Last Name

* Email

* Confirm Email

Navigate to next step ↓

Navigate to previous step →

D-U-N-S Number

Tax Country

Taxpayer ID

Tax Registration Number

Note to Approver

Save your work & continue at a later time

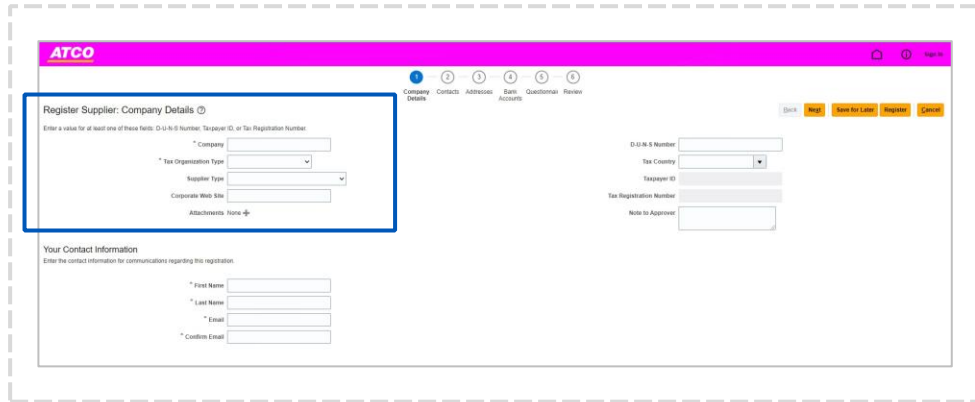
Final button the register all information within SQM

Click to cancel out of the SQM at any point

Note: Please Upload Certificate of Registration and Other Tax Documents under Attachments.

* Attachments None +

Step 1: Access the Supplier Qualification Module (SQM) via link provided by ATCO Employee



Ensure it is your legal entity name

Register Supplier: Company Details ?

Enter a value for at least one of these fields: D-U-N-S Number, Taxpayer ID, or Tax Registration Number.

* Company

* Tax Organization Type

Supplier Type

Corporate Web Site

Attachments

- Corporation
- Foreign Corporation
- Foreign Government Agency
- Foreign Individual
- Foreign Partnership
- Government Agency
- Individual
- Partnership

- ✔ **Step 2:** Complete Company Details Section – Tax Organization Type
Complete all mandatory fields that are marked with an asterisk (*).

One Time Vendors	
Charity	<ul style="list-style-type: none"> Suppliers that are looking to complete one-time contracts Suppliers that do not participate in Sourcing Events
Contingent Worker	
Customer	
Donation	
Financial Institution	
Government	
Insurance	
Landowners	

Registered Suppliers	
Chemicals, Lubricants & Non-Gen Fuels	<ul style="list-style-type: none"> Suppliers that are registering to be become prospective/spend authorized vendors Planning to participate in Sourcing Events
Construction	
Electrical Equipment	
Engineering & Technical Services	
Fleet & Vehicles	
Freight & Logistics	
Industrial Parts & Supplies (MRO)	
Industrial Services	
Information Technology	
Instrumentation and Control	

Step 3: Complete Company Details Section – Supplier Type
 Complete all mandatory fields that are marked with an asterisk (*).
For Supplier Type, reference the table on the right to ensure proper type is selected

Register Supplier: Company Details ⓘ

Enter a value for at least one of these fields: D-U-N-S Number, Taxpayer ID, or Tax Registration Number.

* Company

* Tax Organization Type

Supplier Type

Corporate Web Site

Attachments

* First Name

* Last Name


* Email

* Confirm Email

YOUR CONTACT INFORMATION

Enter the contact information for communications regarding this registration.

Charity
 Chemicals, Lubricants and Non-Gen Fuels
 Construction
 Contingent Worker
 Corporate
 Customer
 Donation
 Electrical Equipment
 Engineering and Technical Services
 Financial Institution
 Fleet and Vehicles
 Freight and Logistics
 Government
 Industrial Parts and Supplies (MRO)
 Industrial Services
 Information Technology
 Instrumentation and Control
 Insurance
 Landowners

- 
Step 4: Complete Company Details Section – Contact Information
 Complete all mandatory fields that are marked with an asterisk (*).
 Contact Information should be linked to an active email account, where all registration information can be sent and verified.

ATCO

Company Details | Contacts | Addresses | Bank Accounts | Questionnaire | Review

Register Supplier: Company Details

Enter a value for at least one of these fields: D-U-N-S Number, Taxpayer ID, or Tax Registration Number

* Company

* Tax Organization Type

Supplier Type

Corporate Web Site

Attachments: None

Your Contact Information

Enter the contact information for communications regarding this registration.

* First Name

* Last Name

* Email

* Confirm Email

D-U-N-S Number

Tax Country

Taxpayer ID

Tax Registration Number

Note to Approver

Your Contact Information

Enter the contact information for communications regarding this registration.

* First Name

* Last Name

* Email

* Confirm Email



Step 5: Complete Company Details Section

Complete Tax Information by entering either D-U-N-S Number, Taxpayer ID or Tax Registration Number

Upload Certificate of Registration or any other Tax Documents (US Suppliers – to upload W9 form)

D-U-N-S Number

Tax Country

 ▼

Taxpayer ID

Tax Registration Number

Note to Approver

Note: Please Upload Certificate of Registration and Other Tax Documents under Attachments.

* Attachments None +

Register Supplier: Company Details ?

Enter a value for at least one of these fields: D-U-N-S Number, Taxpayer ID, or Tax Registration Number.

* Company
* Tax Organization Type
Supplier Type
Corporate Web Site

D-U-N-S Number
Tax Country
Taxpayer ID
Tax Registration Number
Note to Approver

Note: Please Upload Certificate of Registration and Other Tax Documents under Attachments.

* Attachments None +

Your Contact Information

Enter the contact information for communications regarding this registration.

* First Name
* Last Name
* Email
* Confirm Email

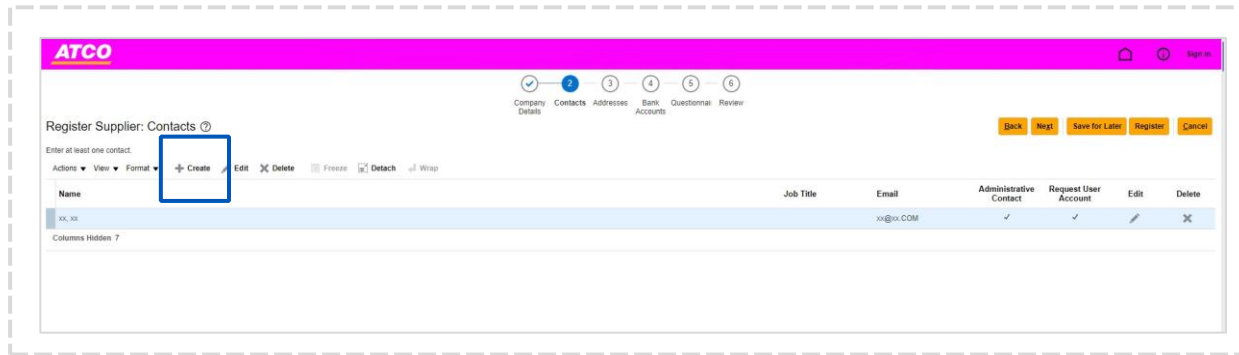
Step 6: Once all information has been entered, verify that:

- Company Name has been entered correctly (i.e no typos, leading spaces, no errors in spelling)

- Ensure that the correct supplier type has been selected to ensure the remainder of the SQM is accurate. If you choose to press the Save for Later button you can save your registration and you will get an email that says “Supplier Registration Was Saved” You will get a link to continue and complete your Supplier Registration request at a later time.
- Confirm that the email is linked to an active email account to ensure registration details are being sent appropriately

To move onto the next step of the SQM portal, click the “Next” button.

- **Step 7:** Contact Information entered on “Company Details” Page will appear in this tab, you may enter multiple contact names
 - To Edit an existing contact, highlight the name and click “EDIT”
 - To Create a new contact, click “CREATE”



Create Contact

Salutation

* First Name

Middle Name

* Last Name

Job Title

Administrative contact

Phone

Mobile

Fax

* Email

Request user account

Roles

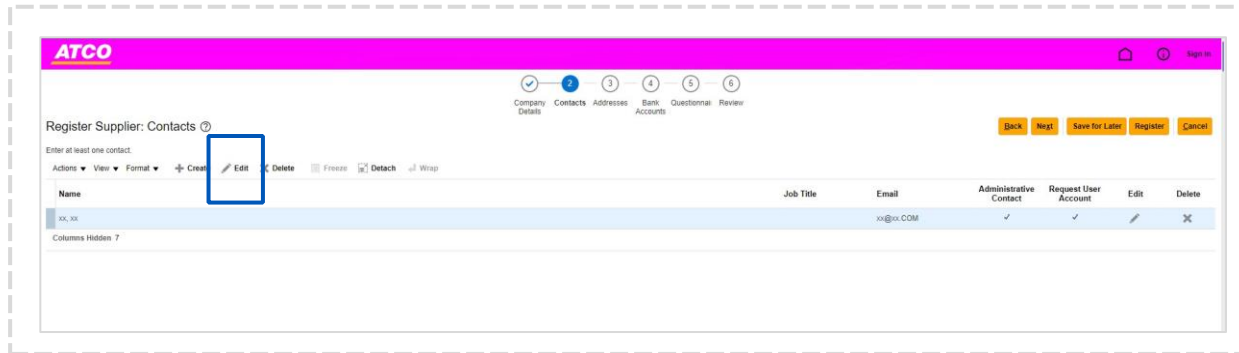
Actions View Format Freeze Detach Wrap

Role	Description
No data to display.	



Step 8: To CREATE a new contact - enter all mandatory fields

- First Name, Last Name, Job Title, If they are an administrative contract , Phone Number and Email Address
- Once done and no more contacts to create – click OK
- If additional contact needs to be created, click Create Another



Edit Contact: XXX XXX

Salutation

* First Name

Middle Name

* Last Name

Job Title

Administrative contact

Phone

Mobile

Fax

* Email

Request user account

Roles

Actions View Format X [icon] Freeze Detach Wrap

Role	Description
Supplier Bidder	Sales representative from a potential supplier responsible for responding to requests for quote, requests for proposal, request...
Supplier Self Service Administrator	Manages the profile information for the supplier company. Primary tasks include updating supplier profile information and requ...
Supplier Self Service Clerk	Manages the profile information for the supplier company. Primary tasks include updating supplier profile information and requ...

OK Cancel

- Step 9:** To EDIT an existing contact - enter all mandatory fields
 - First Name, Last Name, Job Title, If they are an administrative contract , Phone Number and Email Address

Once complete and no more contacts to add, then click OK or if another contacts needed to be entered, click create another



Register Supplier: Contacts ?

[Back](#)
[Next](#)
[Save for Later](#)
[Register](#)
[Cancel](#)

Enter at least one contact.

[Actions](#)
[View](#)
[Format](#)
[+ Create](#)
[Edit](#)
[Delete](#)
[Freeze](#)
[Detach](#)
[Wrap](#)

Name	Job Title	Email	Administrative Contact	Request User Account	Edit	Delete
xx, xx		xx@xx.COM	✓	✓		

Columns Hidden 7

Step 10: Once you have entered in all the contact information and verified that all accounts are set up, click Next to move to next page




Register Supplier: Addresses

[Back](#) [Next](#) [Save for Later](#) [Register](#) [Cancel](#)

Enter at least one address for remit-to and ordering address purposes.

Actions ▾ View ▾ Format ▾ **+ Create** Edit Delete Freeze Detach Wrap

Address Name	Address	Phone	Address Purpose	Edit	Delete
No data to display.					
Columns Hidden 3					

 **Step 11:** Addresses need to be entered into the system as there is no existing data on record, to enter in an address, click “Create”



Create Address

* Address Name

* Country

* Address Line 1

Address Line 2

Address Line 3

* City

* Province

Postal Code

* Address Purpose Ordering
 Remit to
 RFQ or Bidding

Phone 1

Fax 1

Email

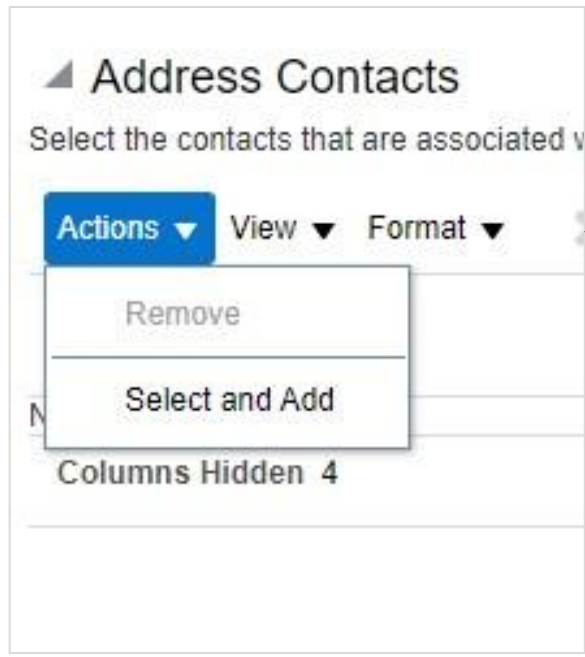
Address Contacts

Select the contacts that are associated with this address.

Actions View Format X Freeze Detach Wrap

Name	Job Title	Email	Administrative Contact	User Account
No data to display.				
Columns Hidden 4				

Create Another OK Cancel



Step 12: To add NEW address - enter in all mandatory fields:

- Address name (i.e), Country, Address Line 1, City, Province , Postal Code
- Address Purpose (can select one, or select all that apply) – different address might serve different purposes

- To select active contacts that are connected to the address, click 'Actions' → 'Select and Add'

Once complete and no more addresses to add, then click OK or if another address needed to be entered, click create another

 **Step 13:** Once you have entered in all the contact information and verified that all accounts are set up, click Next to move to next page



Register Supplier: Bank Accounts ?

[Back](#) [Next](#) [Save for Later](#) [Register](#) [Cancel](#)Actions ▾ View ▾ Format ▾ **+ Create** Edit Delete Freeze Detach Wrap

Account Number	IBAN	Currency	Bank	Edit	Delete
No data to display.					
Columns Hidden 8					

Step 14: Bank Information needs to be entered into the system as there is no existing data on record, to enter in banking information, click “Create”



 **Step 15:** To Enter NEW Bank Account Information - enter in all mandatory fields:

- Country, Bank, Branch , Account Number
- Add in any additional notes for consideration in text box below
- Please verify that all information is correct before moving on

**Suppliers will be required to upload blank/void cheque in later steps*

Once complete and no more bank accounts to add, then click OK or if another account needed to be entered, click create another

Create Bank Account

Enter account number or IBAN unless account number is marked as required.

* Country

IBAN

Bank

Currency

Branch

Account Number

Additional Information

Account Name

Agency Location Code

Alternate Account Name

Account Type

Account Suffix

Description

Check Digits

Comments

Note to Approver

Create Another

OK

Cancel

Register Supplier: Bank Accounts ?[Back](#) [Next](#) [Save for Later](#) [Register](#) [Cancel](#)Actions ▼ View ▼ Format ▼ [+ Create](#) [Edit](#) [Delete](#) [Freeze](#) [Detach](#) [Wrap](#)

Account Number	IBAN	Currency	Bank	Edit	Delete
----------------	------	----------	------	------	--------

No data to display.

Columns Hidden 8

Step 16: Once you have entered in all the bank accounts and verified that all accounts are set up, click Next to move to next page



Register Supplier: Questionnaire

There are no questions that require a response at this time.

Back Next Save for Later Register Cancel

Step 17: If you identify as a one-time vendor, you do not have to complete the questionnaire – you may skip to Slide 33

Register Supplier: Questionnaire

Hello, Welcome to ATCO Supplier Registration Questionnaire. Please provide correct responses to all the questions. Regards

[Back](#) [Next](#) [Save for Later](#) [Register](#) [Cancel](#)

Attachments None

Questions

General Company Information (Section 1 of 6)

- 1. General Company Information**
- 2. Audit, Compliance and Regulatory
- 3. Indigenous Relations
- 4. Sustainability
- 5. Code of Conduct
- 6. Areas of Business

* 1. Provide your most up-to-date Certificate of Insurance

* Response Attachments None +

* 2. Are you registered with the Workers Compensation Board (WCB)?

a. Yes

b. No

* 3. How many employees do you have in your company?

a. 0-20

b. 20-50

c. 50-100

d. 100-200

e. 200+

 **Step 18:** If you identify as a registered vendor and are looking to participate in sourcing events, complete the questionnaire.

Questions

General Company Information (Section 1 of 6)

* 1. Provide your most up-to-date Certificate of Insurance

* Response Attachments None +

* 2. Are you registered with the Workers Compensation Board (WCB)?

a. Yes

b. No

* 2.a.1. If yes, provide your WCB Certificate

* Response Attachments None +

* 2.a.2. Provide your WCB Number

* 2.a.3. Provide your WCB Expiry Date

No text required in box, complete upload of Certificate of Insurance

If you answer 'Yes' to being registered with WCB, complete the following branching questions.

If you answer "No", proceed to next question

Step 19: Complete all mandatory questions

* 4. Would you describe yourself as a mature (12+ years), intermediate (8+ years) or newcomer (2+) to your current industry?

a. Mature

b. Intermediate

c. Newcomer

* 5. Have you completed work with any ATCO subsidiary in the past?

a. Yes

b. No

* 5.a.1. If yes, please describe the scope of work, period of time and ATCO subsidiary

Response Attachments None +

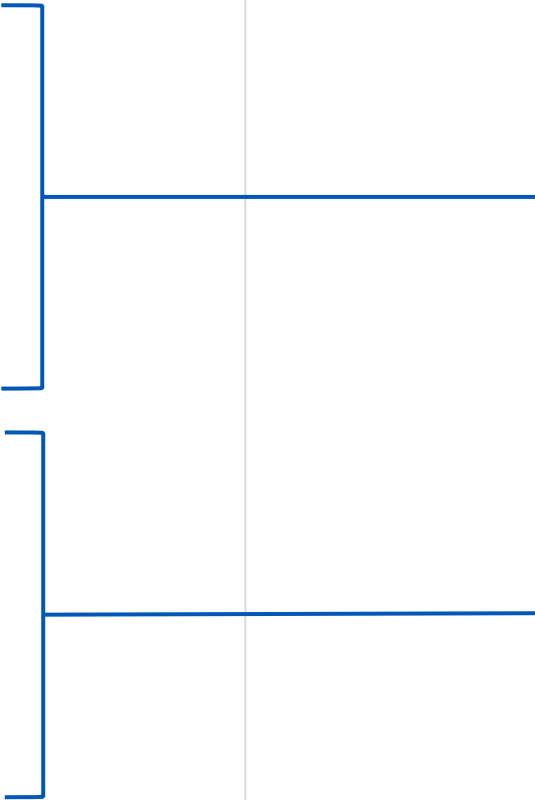
* 6. Do you have any Joint Ventures with ATCO?

a. Yes

b. No

* 6.a.1. If yes, please describe the scope of work, period of time and ATCO Company?

Response Attachments None +



If your business has completed work with a subsidiary in the past, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business has not, click 'No' and proceed to next question

If your business has any current Joint Venture with ATCO , answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business does not, click 'No' and proceed to next question

 **Step 20:** Complete all mandatory questions

* 7. Are you connected to another parent company as a subsidiary?

a. Yes

b. No

* 7.a.1. If yes, what is the parent company and what other subsidiaries are tied under

Response Attachments None +

* 8. Do you have any active litigation with ATCO or any ATCO subsidiaries?

a. Yes

b. No

* 8.a.1. If yes, please provide a brief summary

Response Attachments None +

* 9. Do you have any active litigation (or reasonable anticipation of forthcoming litigation) which could jeopardize your ability to perform contracted requirements for ATCO and/or its subsidiaries?

a. Yes

b. No

* 9.a.1. If yes, please provide a brief summary

Response Attachments None +

If your business has completed work with a subsidiary in the past, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business has not, click 'No' and proceed to next question

If your business has any active litigation, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business does not, click 'No' and proceed to next question

If your business has any active litigation, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business does not, click 'No' and proceed to next question

 **Step 21: Complete all mandatory questions**

* 7. Are you connected to another parent company as a subsidiary?

a. Yes

b. No

* 7.a.1. If yes, what is the parent company and what other subsidiaries are tied under

Response Attachments None +

* 8. Do you have any active litigation with ATCO or any ATCO subsidiaries?

a. Yes

b. No

* 8.a.1. If yes, please provide a brief summary

Response Attachments None +

* 9. Do you have any active litigation (or reasonable anticipation of forthcoming litigation) which could jeopardize your ability to perform contracted requirements for ATCO and/or its subsidiaries?

a. Yes

b. No

* 9.a.1. If yes, please provide a brief summary

Response Attachments None +

If your business has completed work with a subsidiary in the past, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business has not, click 'No' and proceed to next question

If your business has any active litigation, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business does not, click 'No' and proceed to next question

If your business has any active litigation, answer 'Yes' and provide a brief description of the work completed OR attach file that speaks to the scope of work completed

If your business does not, click 'No' and proceed to next question

 **Step 22: Complete all mandatory questions**

* 10. Certificate of Registration Attachment
[] Upload Certificate of Registration
* Response Attachments None +

* 11. Upload a blank/void cheque.
💡 The cheque should confirm bank details entered in "Bank Accounts" stage
[] Upload blank or void cheque to verify bank account information
* Response Attachments None +

End of Section 1 of 6

Previous Section Next Section

- ✔ **Step 23:** Once all questions in this section are complete, use the navigation at the bottom of the page to click 'Next Section'
Do not use "next" at the top of the screen

✓ ✓ ✓ ✓ 5 ✓
 Company Details Contacts Addresses Bank Accounts **Questionnaire** Review

Register Supplier: Questionnaire

Back
Next
Save for Later
Register
Cancel

Hello, Welcome to ATCO Supplier Registration Questionnaire. Please provide correct responses to all the questions. Regards

Attachments: None

Section

- ✓ 1. General Company Information
- ✓ 2. Audit, Compliance and Regulatory
- 3. Indigenous Relations
- 4. Sustainability
- 5. Code of Conduct
- 6. Areas of Business

Questions

Audit, Compliance and Regulatory (Section 2 of 6)

* 10. Does your company have a current COR/MECOR/SECOR (Certificate Of Recognition/Medium Employer Certificate of Recognition/Small Employer Certificate of Recognition)?

a. Yes
 b. No

* 10. a.1. If yes, please attach certificate

* Response Attachments: None +

End of Section 2 of 6

If your business has a current COR , answer 'Yes' and attach certificate

If you have not, click 'No' and proceed to next question

Previous Section
Next Section

* A Certificate of Recognition (COR) is **awarded to employers who develop health and safety programs that meet established standards**. A COR shows that the employer's health and safety management system has been evaluated by a certified auditor and meets provincial standards. These standards are established by Occupational Health and Safety (OHS).

Step 24: Once all questions in this section are complete, use the navigation at the bottom of the page to click 'Next Section'
Do not use "next" at the top of the screen

Questions

Indigenous Relations (Section 3 of 6)

Section

- 1. General Company Information
- 2. Audit, Compliance and Regulatory
- 3. Indigenous Relations
- 4. Sustainability
- 5. Code of Conduct
- 6. Areas of Business

* 11. Are there any parts of the business that are Indigenous owned?

- a. Yes
- b. No

* 11.a.1. If yes, what percentage is Indigenous owned?

- a. <50%
- b. >=50%

* 12. Percent of permanent Indigenous employees

- a. 0%-25%
- b. 25%-50%
- c. 50%-75%
- d. 75%-100%

* 13. Percent of temporary Indigenous employees

- a. 0%-25%
- b. 25%-50%
- c. 50%-75%
- d. 75%-100%

* 14. Does your company have an Indigenous strategy?

- a. Yes
- b. No

* 14.a.1. If yes, provide the details of how your Indigenous strategy compliments your core functions.

Response Attachments None +

- An Indigenous business can be:
 - a band as defined by the Indian Act
 - a sole proprietorship
 - a limited company
 - a co-operative
 - a partnership
 - a not-for-profit organization
 - a collaboration agreement
 - in which Indigenous persons have at least 51% ownership and control.
- An Indigenous business can also be a joint venture consisting of 2 or more Indigenous businesses or an Indigenous business and a non-Indigenous business, provided that the Indigenous business or businesses have at least 51% ownership and control of the joint venture.
- In instances where 1 or more Indigenous businesses, as defined under the rules of PSIB, are involved in a contract with 1 or more non-Indigenous businesses or individual contractors, 33% of the total monetary value of the work contracted for must be performed by Indigenous businesses.



Step 25: Complete all mandatory questions

Questions
Indigenous Relations (Section 3 of 6)

Section

- 1. General Company Information
- 2. Audit, Compliance and Regulatory
- 3. Indigenous Relations
- 4. Sustainability
- 5. Code of Conduct
- 6. Areas of Business

* 11. Are there any parts of the business that are Indigenous owned?

a. Yes

b. No

* 11.a.1. If yes, what percentage is Indigenous owned?

a. <50%

b. >=50%

* 12. Percent of permanent Indigenous employees

a. 0%-25%

b. 25%-50%

c. 50%-75%

d. 75%-100%

* 13. Percent of temporary Indigenous employees

a. 0%-25%

b. 25%-50%

c. 50%-75%

d. 75%-100%

* 14. Does your company have an Indigenous strategy?

a. Yes

b. No

* 14.a.1. If yes, provide the details of how your Indigenous strategy compliments your core functions.

Response Attachments None +

If your business is part-indigenous owned, click 'Yes' and indicate what percentage


If your business is not, click 'No' and proceed to next question

If your business has an indigenous strategy, answer 'Yes' and provide a brief description or documentation as it relates to the strategy

If your business does not, click 'No' and proceed to next question

Step 26: Complete all mandatory questions

Section	
<input checked="" type="checkbox"/> 1. General Company Information	
<input checked="" type="checkbox"/> 2. Audit, Compliance and Regulatory	
<input checked="" type="checkbox"/> 3. Indigenous Relations	<p>* 15. Does your company provide any commitments to Indigenous inclusion and benefits?</p> <p><input checked="" type="radio"/> a. Yes</p> <p><input type="radio"/> b. No</p> <p>* 15.a.1. If yes, please provide a detailed demonstration this commitment.</p> <input type="text"/> <p>Response Attachments None +</p> <p>* 16. Has your company been involved in successful engagements &/or partnerships with Indigenous communities and organizations?</p> <p><input checked="" type="radio"/> a. Yes</p> <p><input type="radio"/> b. No</p> <p>* 16.a.1. If yes, please provide any information that confirms these engagements.</p> <input type="text"/> <p>Response Attachments None +</p> <p>* 17. Does your company subcontract to or engage in revenue sharing with Indigenous communities?</p> <p><input checked="" type="radio"/> a. Yes</p> <p><input type="radio"/> b. No</p> <p>* 17.a.1. If yes, please provide detailed description of the subcontracting and/or revenue sharing.</p> <input type="text"/> <p>Response Attachments None +</p> <p>* 18. Has your company invested in Indigenous communities through training, skills development, and employment opportunities?</p> <p><input checked="" type="radio"/> a. Yes</p> <p><input type="radio"/> b. No</p> <p>* 18.a.1. If yes, please provide a detailed description of Indigenous communities that have directly been impacting through the trainings, skill development, and employment opportunities offered.</p> <input type="text"/> <p>Response Attachments None +</p> <p>End of Section 3 of 6</p>
<input type="checkbox"/> 4. Sustainability	
<input type="checkbox"/> 5. Code of Conduct	
<input type="checkbox"/> 6. Areas of Business	

 **Step 27:** Once all questions in this section are complete, use the navigation at the bottom of the page to click 'Next Section'
Do not use "next" at the top of the screen

Questions

Sustainability and Environmental (Section 4 of 6)

Section
<input checked="" type="checkbox"/> 1. General Company Information
<input checked="" type="checkbox"/> 2. Audit, Compliance and Regulatory
<input checked="" type="checkbox"/> 3. Indigenous Relations
<input checked="" type="checkbox"/> 4. Sustainability and Environmental
<input checked="" type="checkbox"/> 5. Code of Conduct
<input checked="" type="checkbox"/> 6. Areas of Business

- * 21. Does your company have a documented sustainability policy or statement?
- a. Yes
 b. No
- * 22. Does your company disclose sustainability performance information through a publicly available report?
- a. Yes
 b. No
- * 23. Does your organization have programs to advocate for diversity equity and inclusion?
- a. Yes
 b. No
- * 24. Does your company have a corporate policy or standard in place to ensure compliance with all applicable human rights laws in the jurisdictions in which your company operates?
- a. Yes
 b. No
- * 25. Does your company have procedures for identifying and assessing environmental-related risks? (Water, biodiversity, etc)
- a. Yes
 b. No
- * 26. Does your company measure its GHG emissions?
- a. Yes
 b. No
- * 27. Has your company adopted GHG reduction targets or goals?
- a. Yes
 b. No

End of Section 4 of 6

[Previous Section](#)

[Next Section](#)



Step 28: Once all questions in this section are complete, use the navigation at the bottom of the page to click 'Next Section'
Do not use "next" at the top of the screen

Questions
Code of Conduct (Section 5 of 6)

* 25. Do you agree to be compliant with ATCO Vendor Conduct Requirements as outlined in the following policy:
<https://www.atco.com/content/dam/web/home-page/atco-vendor-conduct-requirements.pdf>

a. Yes
 b. No

End of Section 5 of 6

[Previous Section](#) [Next Section](#)

ATCO

VENDOR CONDUCT REQUIREMENTS

Rev. 2023-01-12

Vendor Conduct Requirements Purpose

These Vendor Conduct Requirements (the "Conduct Requirements") have been developed in order to share the expectations and requirements for vendors, contractors, suppliers, consultants, contract labourers, intermediaries, and other business partners (collectively "Vendors") who provide goods or services to or on behalf of ATCO Ltd. or any of their Affiliates (as such term is defined in Alberta's *Business Corporations Act*) (collectively "ATCO") and to ensure Vendors are in alignment with ATCO's Code of Ethics, available at <https://www.atco.com/en-ca/about-us/vision-values.html> ("Code of Ethics"). Compliance with the Conduct Requirements is a requirement for becoming and remaining an ATCO Vendor. In addition to any applicable legal and regulatory requirements, Vendors are expected to share and practice ATCO's core values of Safety, Integrity, Agility, Caring, and Collaboration, as described in the Code of Ethics, and ensure that their employees, suppliers, and sub-suppliers that perform work for ATCO read, understand, and follow the Conduct Requirements and the underlying policies and practices that are applicable to them.

Violations of the Conduct Requirements

ATCO takes violations of the Conduct Requirements very seriously and encourages Vendors to actively monitor their compliance with the Conduct Requirements. ATCO may seek to verify Vendors' compliance with the Conduct Requirements and expects Vendors to cooperate with related requests. If any non-compliance with the Conduct Requirements is discovered, Vendors are expected to take reasonable steps to address, remedy, and prevent reoccurrence of the non-compliant conduct. Failure to comply with the Conduct Requirements or cooperate with ATCO's requests related to verifying such compliance may result in the termination of the commercial relationship between such Vendor and ATCO.

Step 29: Copy and paste the URL into internet browser, 'Vendor Conduct Requirements' webpage should open
Read through the documentation and respond accordingly to the question

Once all questions in this section are complete, use the navigation at the bottom of the page to click 'Next Section'
Do not use "next" at the top of the screen

Register Supplier: Questionnaire

[Back](#) [Next](#) [Save for Later](#) [Register](#) [Cancel](#)

Hello, Welcome to ATCO Supplier Registration Questionnaire. Please provide correct responses to all the questions. Regards

Attachments None

Section	Questions																																
<input checked="" type="checkbox"/> 1. General Company Information																																	
<input checked="" type="checkbox"/> 2. Audit, Compliance and Regulatory																																	
<input checked="" type="checkbox"/> 3. Indigenous Relations																																	
<input checked="" type="checkbox"/> 4. Sustainability																																	
<input checked="" type="checkbox"/> 5. Code of Conduct																																	
<input checked="" type="checkbox"/> 6. Areas of Business	<p>Areas of Business (Section 6 of 6)</p> <p>* 26. Which is your current area of business?</p> <table border="0"> <tr> <td><input type="checkbox"/> a. Chemicals, Lubricants and Non-Gen Fuels</td> <td><input type="checkbox"/> i. Industrial Services</td> </tr> <tr> <td><input type="checkbox"/> b. Construction</td> <td><input type="checkbox"/> j. Information Technology</td> </tr> <tr> <td><input type="checkbox"/> c. Corporate</td> <td><input type="checkbox"/> k. Instrumentation and Control</td> </tr> <tr> <td><input type="checkbox"/> d. Electrical Equipment</td> <td><input type="checkbox"/> l. Maintenance Services</td> </tr> <tr> <td><input type="checkbox"/> e. Engineering and Technical Services</td> <td><input type="checkbox"/> m. Mechanical Equipment</td> </tr> <tr> <td><input type="checkbox"/> f. Fleet & Vehicles</td> <td><input type="checkbox"/> n. Process Equipment</td> </tr> <tr> <td><input type="checkbox"/> g. Freight & Logistics</td> <td><input type="checkbox"/> o. Rotating Equipment</td> </tr> <tr> <td><input type="checkbox"/> h. Industrial Parts & Supplies (MRO)</td> <td><input type="checkbox"/> p. Other</td> </tr> </table> <p>* 27. Where would you like to be considered for future projects? (Do not repeat selections from question above)</p> <table border="0"> <tr> <td><input type="checkbox"/> a. Chemicals, Lubricants and Non-Gen Fuels</td> <td><input type="checkbox"/> i. Industrial Services</td> </tr> <tr> <td><input type="checkbox"/> b. Construction</td> <td><input type="checkbox"/> j. Information Technology</td> </tr> <tr> <td><input type="checkbox"/> c. Corporate</td> <td><input type="checkbox"/> k. Instrumentation and Control</td> </tr> <tr> <td><input type="checkbox"/> d. Electrical Equipment</td> <td><input type="checkbox"/> l. Maintenance Services</td> </tr> <tr> <td><input type="checkbox"/> e. Engineering and Technical Services</td> <td><input type="checkbox"/> m. Mechanical Equipment</td> </tr> <tr> <td><input type="checkbox"/> f. Fleet & Vehicles</td> <td><input type="checkbox"/> n. Process Equipment</td> </tr> <tr> <td><input type="checkbox"/> g. Freight & Logistics</td> <td><input type="checkbox"/> o. Rotating Equipment</td> </tr> <tr> <td><input type="checkbox"/> h. Industrial Parts & Supplies (MRO)</td> <td><input type="checkbox"/> p. Other</td> </tr> </table> <p>End of Section 6 of 6</p>	<input type="checkbox"/> a. Chemicals, Lubricants and Non-Gen Fuels	<input type="checkbox"/> i. Industrial Services	<input type="checkbox"/> b. Construction	<input type="checkbox"/> j. Information Technology	<input type="checkbox"/> c. Corporate	<input type="checkbox"/> k. Instrumentation and Control	<input type="checkbox"/> d. Electrical Equipment	<input type="checkbox"/> l. Maintenance Services	<input type="checkbox"/> e. Engineering and Technical Services	<input type="checkbox"/> m. Mechanical Equipment	<input type="checkbox"/> f. Fleet & Vehicles	<input type="checkbox"/> n. Process Equipment	<input type="checkbox"/> g. Freight & Logistics	<input type="checkbox"/> o. Rotating Equipment	<input type="checkbox"/> h. Industrial Parts & Supplies (MRO)	<input type="checkbox"/> p. Other	<input type="checkbox"/> a. Chemicals, Lubricants and Non-Gen Fuels	<input type="checkbox"/> i. Industrial Services	<input type="checkbox"/> b. Construction	<input type="checkbox"/> j. Information Technology	<input type="checkbox"/> c. Corporate	<input type="checkbox"/> k. Instrumentation and Control	<input type="checkbox"/> d. Electrical Equipment	<input type="checkbox"/> l. Maintenance Services	<input type="checkbox"/> e. Engineering and Technical Services	<input type="checkbox"/> m. Mechanical Equipment	<input type="checkbox"/> f. Fleet & Vehicles	<input type="checkbox"/> n. Process Equipment	<input type="checkbox"/> g. Freight & Logistics	<input type="checkbox"/> o. Rotating Equipment	<input type="checkbox"/> h. Industrial Parts & Supplies (MRO)	<input type="checkbox"/> p. Other
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Select all the areas of business you currently operate in

Select all the areas of business you would like to be considered for future projects for

[Previous Section](#) [Next Section](#)

Step 30: Once all questions in this section are complete, validate that all questions have been answered completely.
Use the 'back' button to navigate to review all sections

Step 31: Once done, click 'Next' to get to review stage

ATCO Home ⓘ Sign in

✓ ✓ ✓ ✓ ✓ 6
 Company Details Contacts Addresses Bank Accounts Questionnai **Review**

Review Supplier Registration: XXX ?
Back
Next
Save for Later
Register
Cancel

Company Details

Company XXX Tax Organization Type Corporation Supplier Type Corporate Corporate Web Site	D-U-N-S Number 123456789 Tax Country Taxpayer ID Tax Registration Number Note to Approver
---	---

Attachments

Actions ▾ View ▾ + ✕

Type	Category	* File Name or URL	Title	Description	Attached By	Attached Date
No data to display.						

Questionnaire

Questionnaire Details ✕ Response missing for required questions

*Error message might pop up if responses are missing within the questionnaire portion

- ✓ **Step 32:** Once all information has been entered, review each section to verify that all data has been entered and that the answers provided as accurate and up to date
- ✓ **Step 33:** Once all information has been verified – click Register

FOR EXISTING SUPPLIERS

Sign In Oracle Applications Cloud

[Forgot Password](#)

Sign In

Step 1: Login to ATCO Oracle Platform

Good evening, Test Contact!

My Client Groups Supplier Portal Tools Others

APPS



Things to Finish

Step 2: Click into 'Supplier Portal'

ATCO

Supplier Portal

Tasks

Orders

- Manage Orders
- Manage Schedules
- Acknowledge Schedules in Spreadsheet

Agreements

- Manage Agreements

Channel Programs

- Manage Programs

Contracts and Deliverables

- Manage Contracts
- Manage Deliverables

Negotiations

- View Active Negotiations
- Manage Responses

Qualifications

- Manage Questionnaires
- View Qualifications

Company Profile

- Manage Profile

Requiring Attention

Series: Questionnaires
Value: 1

1

Questionnaires

Recent Activity
Last 30 Days

No data available

Transaction Reports
Last 30 Days

No data available

- ✓ **Step 3:** Review Section 'Requiring Attention' to see if any questionnaires are pending
If any pending questionnaires, circle will show '1'
- ✓ **Step 4:** To start questionnaire, click on the circle or 'Manage Questionnaires'

ATCO Home, Flag, Bell, TC

Manage Questionnaires Done

Search

Advanced | Manage Watchlist | Saved Search | Requiring Attention ▼
** At least one is required

** Questionnaire Title

** Questionnaire

** Supplier Site

** Status

** Response Due Date

** Supplier Contact

Search | Reset | Save...

Search Results

Actions ▼ | View ▼ | Format ▼ | | | Freeze | Detach | Wrap | Respond

Questionnaire	Questionnaire Title	Supplier Site	Status	Response Due Date	View PDF
1600000001	Test0001	MACKAY1.1	Not started		

Columns Hidden: 0

- Step 5:** Questionnaires that are pending will appear in the table below and will appear with a “Not Started” status
- Step 6:** To start questionnaire, highlight title and click ‘Respond’

Save your work & continue at a later time

Final button the register all information within SQM

Respond to Questionnaire: Test0001 ?

Save Save and Close Submit Cancel

Click to cancel out of the SQM at any point

Time Zone Coordinated Universal Time

Questionnaire

Title Test0001
Procurement BU ATCO Ltd. - Common Groups - CA
Requested By

Supplier Ensure correct supplier name and site is populated
Supplier Site
Responder Test Contact

Status Draft
Due Date
Attachments None

Questions

Progress [Progress Tracker] Section 1. General Company Information [Navigation Menu]

Click arrow to move to next section of questions

General Company Information

* 1. Provide your most up-to-date Certificate of Insurance

XYZ

* Response Attachments test +

* 2. Are you registered with the Workers Compensation Board (WCB)?

a. Yes

b. No

* 3. How many employees do you have in your company?

a. 0-20

b. 20-50

For further clarification for how to complete the questionnaire, refer to slides 21-32

ATCO

Respond to Questionnaire: Test0001 ?

Save Save and Close Submit Cancel

Time Zone Coordinated Universal Time
Last Saved 2023-02-16 3:32 PM

Questionnaire

Title Test0001

Procurement BU ATCO Ltd. - Common Groups - CA

Requested By

Supplier

Supplier Site

Responder Test Contact

Status Draft

Due Date

Attachments None

Progress Section 7. Areas of Business

Progress Tracker Navigation Menu

* 27. Which is your current area of business?

a. Chemicals, Lubricants and Non-Gen Fuels i. Industrial Services

Response Attachments None +

b. Construction j. Information Technology

c. Corporate k. Instrumentation and Control

d. Electrical Equipment l. Maintenance Services

e. Engineering and Technical Services m. Mechanical Equipment

Save your work & continue at a later time

Final button to register all information within SQM

Click to cancel out of the SQM at any point

Click arrow to move to next section of questions

Step 8: Complete the questionnaire and answer all mandatory questions
For further clarification for how to complete the questionnaire, refer to slides [20-30](#)

Step 9: Once you have answered all the questions, click 'Submit'

ATCO Home, Flag, Bell, TC

Respond to Questionnaire: Test0001 Save Save and Close Submit Cancel

Error

You can't submit the questionnaire because question 7 in section General Company Information requires a response. (POQ-3645094)

OK

Time Zone Coordinated Universal Time
Last Saved 2023-02-16 3:32 PM

Questionnaire

Title Test0001

Procurement BU ATCO Ltd. - Common Groups - CA Supplier Site Due Date

Requested By Responder Test Contact Attachments None

Questions

Progress Section 7. Areas of Business

Areas of Business

* 27. Which is your current area of business?

a. Chemicals, Lubricants and Non-Gen Fuels i. Industrial Services

Response Attachments None +

b. Construction j. Information Technology

c. Corporate k. Instrumentation and Control

d. Electrical Equipment l. Maintenance Services

e. Engineering and Technical Services m. Mechanical Equipment

Step 10: Make sure to review that all questions have been answered
If any mandatory questions have been left blank, the following error message will appear

Respond to Questionnaire: Test0001 ?

Save Save and Close Submit Cancel

Time Zone Coordinated Universal Time
Last Saved 2023-02-16 3:32 PM

Questionnaire

Title	Test0001	Supplier		Status	Draft
Procurement BU	ATCO Ltd. - Common Groups - CA	Supplier Site		Due Date	
Requested By		Responder	Test Contact	Attachments	None

Questions

Progress Section 7. Areas of Business

Areas of Business

- * 27. Which is your current area of business?
- | | |
|--|---|
| <input checked="" type="checkbox"/> a. Chemicals, Lubricants and Non-Gen Fuels | <input type="checkbox"/> i. Industrial Services |
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| <input type="checkbox"/> d. Electrical Equipment | <input type="checkbox"/> l. Maintenance Services |
| <input type="checkbox"/> e. Engineering and Technical Services | <input type="checkbox"/> m. Mechanical Equipment |
- Response Attachments None +

Step 11: Once you have made all corrections and ensured all answers are complete, click 'Submit'

Manage Questionnaires ?

Done

Search

** Questionnaire Title

** Questionnaire

** Supplier Site

Confirmation ✕

Response to questionnaire Test0001 is submitted.

Saved Search ▼

** At least one is required

** Status ▼

** Response Due Date

** Supplier Contact

Search Results

Actions ▼ View ▼ Format ▼ Freeze Detach Wrap

Questionnaire	Questionnaire Title	Supplier Site	Status	Response Due Date	View PDF
1600000001	Test0001	MACKAY1.1	Not started		<input type="button" value="📄"/>

Columns Hidden 6

Step 12: Once questionnaire has been submitted, confirmation pop-up will appear

Manage Questionnaires ?

Done

Search

Advanced Manage Watchlist Saved Search Requiring Attention

** At least one is required

** Questionnaire Title
** Questionnaire
** Supplier Site

** Status All
** Response Due Date yyyy-mm-dd
** Supplier Contact

Search Reset Save...

Search Results

Actions View Format Freeze Detach Wrap Respond

Questionnaire	Questionnaire Title	Supplier Site	Status	Response Due Date	View PDF
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Columns Hidden 6

Step 13: Double check to see if there are any pending questionnaires, if table is blank, then you are complete