

APPROVED LIST OF EXTERNAL PROVIDERS (SUBCON / SUPPLIER)

Item	Name	Address	Telephone, Fax & Email	Trade Code	Project Reference	Performance Grade	Remark

Prepared by:		Checked / Reviewed by:		Approved by:	
	Name:		Name:		Comment (if any):
	Position:		Position:		Name:
Signature	Date:	Signature	Date:	Signature	Date:

FORM NO: SLG/CD/FRM/07/02	REVISION NO: 04	EFFECTIVE DATE:15/05/2025
---------------------------	-----------------	---------------------------