

WHISTLEBLOWER DISCLOSURE FORM

A. Whistleblower's contact information

Name	
NRIC No.	
Designation	
Contact Number	
Email Address	

B. Accused person's information

Name	
NRIC No.	
Designation	
Contact Number	
Email Address	

C. Details of improper misconduct

Date	
Time	
Place	
Briefly describe how the improper conduct was committed	

Briefly describe the evidence which may prove the improper misconduct (if applicable)	
Potential witness (if any)	
Any other party involved in the improper misconduct (if any)	

**Note: If there is more than one allegation, list down each allegation and use as many pages as necessary.*

D. Declaration

- I acknowledge that Suezcap Group reserves the rights to use the information and material provided herein strictly for the purpose of investigation of disclosure.

- I hereby declare that all the information furnished herein is true to the best of my knowledge and free from any malicious intent.

Signature: _____

Date: _____

E. For office use

Reference Number:	
Officer:	
Date:	