



**WHISTLEBLOWING FORM
BINTULU PORT HOLDINGS BERHAD**

KINDLY PROVIDE THE FOLLOWING DETAILS AND SUBMIT DIRECTLY TO HEAD, GOVERNANCE, INTEGRITY & COMPLIANCE OF BINTULU PORT HOLDINGS BERHAD OR EMAIL TO: whistle@bintuluport.com.my OR CONTACT 086-291362

PRIVATE & CONFIDENTIAL

Report Reference Number	
Date and Time	

A) PARTICULARS OF WHISTLEBLOWER

Name					
IC. No.					
Contact Numbers	Office		Mobile		Home
E-Mail Address					

B) PARTICULARS OF ALLEGED PERSON

Name	
How Do You Know This Person	
Any Other Details	

C) DETAILS OF IMPROPER CONDUCT / ALLEGATION

Date : _____
 Time : _____
 Place : _____
 Type of Offences : e.g., Bribery/ Criminal Breach of Trust/ Misuse and Abuse Of Power/ Governance/ Misconduct/ False Claim/ Others (Please Specify)

If Money Involved, Can You Estimate the Amount
 RM _____

What improper conduct did you observe / witness? Please explain in detail. (You may use additional sheets if necessary)

Any supporting evidence: Yes / No
 (if any, please enclose it with this report for our further action)



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D) DECLARATION BY WHISTLEBLOWER

Pursuant to **WHISTLEBLOWER PROTECTION ACT 2010**, I declare the following:-

- I acknowledge and declare that all information provided in this Form is true, correct and complete to the best of my knowledge, information and belief;
- I am willing to assist in the investigation of improper conduct (if required);
- Prior to this report, I have not disclosed the subject matter of the complaint or any part thereof to any other person except to the following persons/authority: _____
- I shall notify any changes of my contact details to Head, Integrity & Compliance of Bintulu Port Holdings Berhad as soon as possible;
- I am aware that it is an offence to provide false information/allegation with intention to disgrace the employee or company's image and reputation and/or to misuse the mechanism of whistleblowers system and if I were to find liable for giving false information/ allegation, disciplinary action could be taken against me or any other employee involved in the same.

Signature :

Name :

Date :



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FOR GOVERNANCE, INTEGRITY & COMPLIANCE OFFICE USE ONLY

Received by	
Date and Time received	
Appointed Officer Assigned for this report	
Screening and assessment conducted on/by	
Outcome of screening and assessment	
Investigation Required (Yes / No) (If No, please state the reason)	
Investigation Result	
Action Taken/ Conclusion	
Case Status (Active/Closed)	
Signed Off By	

COPIES FOR RETENTION:-

Original Form – Head of Governance, Integrity & Compliance of Bintulu Port Holdings Berhad retention
Duplicate Form – Whistleblowers retention