WHISTLEBLOWER GUIDE

Please be informed that Indah Water Konsortium Sdn Bhd ("IWK") reserves the right to proceed with investigation on the subject matter of the disclosure. Whistleblower who uses someone else's identity (Name, NRIC, Staff ID, Contact Number, Email Address) will not be entertained and if committed by IWK's staff, will be subjected to discplinary action.

Reporting anonymously without sufficient information is strongly discouraged due to the difficulty in obtaining evidence to corroborate the alleged improper activities before the investigation commences. Please provide the required information of the improper activities as prescribed in the form below.

GUIDELINE			
Who?	Who did the wrongdoing? Who is involved? Their position/scope of work and which Unit Office or Department do they report to? Who else knows about the improper activities? Who can and would confirm that they occurred? How can we reach this witness?		
What?	What wrongdoing occurred? What specifically the suspect do? What is wrong with it? What kinds of documents would provide evidence of the improper activities? Where are the documents located? Who controls them?		
Where?	Where did this happened? Kindly provide specific location (Unit/Plant)		
When?	When did the improper activity occur? Is it ongoing? How frequently has it occurred?		
Why?	What are the suspect(s) motives? For example, how does the suspect benefit from the improper activities? If others benefit from the activities, who are they and how do they benefit?		
How?	How did the wrongdoings occur? Was there a lack of controls, circumvention of controls, or collusion with other individuals?		

Please enclose completed form in an envelope marked "Confidential" and "to be open by addressee only" and mail to:

Head Integrity Unit, INDAH WATER KONSORTIUM SDN. BHD. No 44, Jalan Dungun, Damansara Heights, 50490 Kuala Lumpur

Or, email this attachment to: whistle@iwk.com.my

WHISTLEBLOWER FORM

Whistleblower's Contact Information (Required)				
Name				
NRIC				
Staff ID (for employees only)				
	Email Address			
Contact Number Email Address Details of Disclosure				
Suspect's Information				
Name				
Designation				
Unit/Dept				
Contact Number	Email Address			
Witness(es)' Inform	ation (if any)			
Name (1)				
Unit/Dept				
Contact Number:	Email Address			
Name (2)	Elliali Addiess			
Unit/Dept				
	Email Address			
Complaint Briefly describe the misconduct/improper activity and how you got to know about it. Please provide as much information by specifying what, who, when, where and how. If there is more than one allegation, number each allegations. You may use as many pages as necessary. Please use the Guideline above to help you describe the improper activity in details.				
1. What misconduc	t/improper activity occurred?			
2. Who committed t	he misconduct/improper activity?			
3. When did it happen and when did you notice it?				

5. Is there any evidence that you could provide us? 6. Are there any other parties involved other than the suspect stated above? 7. Do you have any other details or information which could assist us in the investigation? Evidence/Supporting Document(s) Please provide evidence or supporting documents to substantiate your disclosure (if any) to facilitate investigation. You may also attach elevant documents. Declaration (Required) hereby declare that all the information given herein are made voluntarily and true to the best of my knowledge. I will ensure that my participation in this matter will be kept confidential. I do understand that Indah Water Konsortium Sdn. Bhd. will use
5. Are there any other parties involved other than the suspect stated above? 7. Do you have any other details or information which could assist us in the investigation? Evidence/Supporting Document(s) Please provide evidence or supporting documents to substantiate your disclosure (if any) to facilitate investigation. You may also attach elevant documents. Declaration (Required) hereby declare that all the information given herein are made voluntarily and true to the best of my knowledge. I will ensure
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Signature
Name
Date

Note: Complaints from Whistleblower who uses someone else's identity (Name, NRIC, Staff ID, Contact Number, Email Address) will not be entertained and if committed by IWK's staff, will be subjected to disciplinary action.

For Whistleblowing Committee Use Only	Report Number	
Received By:	Received On:	
	Acknowledgement Sent On:	
Investigation Required (Yes/No)? (If no, please state the	reason)	
Investigation Committees:		
investigation committees.		
Investigation Report:		
Action Taken/Conclusion		
Action Taken/Conclusion		
Signed Off By:		