INTERNATIONAL CYANIDE MANAGEMENT INSTITUTE

AUDITOR CREDENTIALS FORM

FOR THE
INTERNATIONAL CYANIDE MANAGEMENT CODE

JUNE 2021

INTERNATIONAL CYANIDE MANAGEMENT INSTITUTE
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AUDITOR CREDENTIALS FORM

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The International Cyanide Management Code (hereinafter "the Code", "Code" or "the Cyanide Code"), this document, and other documents or information sources referenced at *www.cyanidecode.org* are believed to be reliable and were prepared in good faith from information reasonably available to the drafters. However, no guarantee is made as to the accuracy or completeness of any of these other documents or information sources. No guarantee is made in connection with the application of the Code, the additional documents available or the referenced materials to prevent hazards, accidents, incidents, or injury to employees and/or members of the public at any specific site where gold or silver is extracted from ore by the cyanidation process. Compliance with this Code is not intended to and does not replace, contravene or otherwise alter the requirements of any specific national, state or local governmental statutes, laws, regulations, ordinances, or other requirements regarding the matters included herein. Compliance with this Code is entirely voluntary and is neither intended nor does it create, establish, or recognize any legally enforceable obligations or rights on the part of its signatories, supporters or any other parties.

AUDITOR CREDENTIALS FORM

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FACILITY AUDITED

Name of Facility: Mainline Carriers Ltd Tanzania

Date(s) of Audit: 31 May 2022

LEAD AUDITOR

Name of Lead Auditor: Kuldip S. Degon

Auditor Accreditation/
Certification Number: 609312

ORGANIZATION ACCREDITING LEAD AUDITOR

Accrediting Organization: IRCA

Telephone Number: +442072458600

Address: Third Floor, Chancery Lane, London, WC2A1EU, UK .

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AUDITS CONDUCTED AS LEAD AUDITOR

(Please list the three most recent audits conducted in the past seven years as a Lead Auditor.)

YEAR	TYPE OF FACILITY / TYPE OF AUDIT	COUNTRY & STATE/PROVINCE
2021	ICMI Recertification Transport Audit	Tanznaia
2021	ICMi Recertification Transport Audit	Guinea
2021	ICMI Recertification Transport Audit	Ivory Coast

TECHNICAL EXPERT AUDITOR EXPERIENCE

(Please see instructions.)

AUDITOR	YEARS	RELEVANT POSITION TITLES or ROLE	TYPES OF OPERATIONS

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STATEMENT OF NO CONFLICT

I certify that I have not audited any component of this facility for which I was responsible for design or development; nor have I within the past year been an employee of the facility, its parent company, or associated affiliates. Excluding audits, assessments or reviews, I have not derived more than 30% of my income within the past five years from the facility, its parent, or associated affiliates. I have not participated in more than two consecutive Cyanide Code audits of this facility. I have participated in at least three health, safety, and/or environmental audits, assessments or reviews in the past seven years and am familiar with standard audit procedures as well as with the protocols developed by the International Cyanide Management Institute for implementation of the Code.

SIGNATURES

	Name (Print/Type)	Signature*	Date
Lead Auditor	Kuldip S. Degon		01.12.22
Auditor 1:	Sean Webster		01.12.22
Auditor 2:			
Auditor 3:			

*The lead auditor's signature must be certified by notarization or equivalent.

NOTARIZATION

Subscribed and sworn (or affirmed) before me this _____ (Day) day, _____ (Month), of _____ (Year)

By _____
Name of Signer (Print/Type)

Notary Public Signature

CHARLES KYALO KYENGO NOTARY PUBLIC

CHARLES KYALO KYENGO ADVOCATE & COMMISSIONER FOR OATHS / NOTARY PUBLIC P.O Box 29884 - 00100, NAIROBI

AUDITOR CREDENTIALS FORM

INSTRUCTIONS

The following instructions apply to the Auditor Credentials Form for the Cyanide Code. Please refer to the Code's *Auditor Criteria* document for guidance regarding the International Cyanide Management Institute ("ICMI" or "the Institute") criteria that an auditor must meet to be qualified as a "Lead Auditor" or a "Technical Expert Auditor".

1. Facility Audited

Enter the name of the mine, cyanide production, storage or repackaging facility or transport operation audited for which the Lead Auditor is submitting the Auditor Credentials Form along with the date(s) over which the audit was conducted.

2. Lead Auditor

Enter the name of the Lead Auditor and the auditor's Certification Number issued by the Self-Regulating Professional Organization. The Lead Auditor must be certified as a professional environmental, health or safety auditor by a self-regulating professional organization. Certification as a professional auditor in another discipline is acceptable only if the certification is relevant to auditing the Code and the auditor can demonstrate knowledge of environmental, health or safety issues.

3. Statement of No Conflict

By signing the Auditor's Credential Form, the auditors are certifying that their participation in the audit does not present a conflict of interest under the Code. Please refer to the Code's *Auditor Criteria* document for additional guidance regarding the four prohibitions that apply to all audit team members conducting a Cyanide Code Certification Audit.

4. Certifying Organization

Enter the name, telephone number, mailing address and website address for the self-regulating professional organization by which the Lead Auditor is certified.

5. Minimum Experience

Enter the information requested for the three most recent environmental, health or safety audits conducted as a Lead Auditor in the past seven years, including the year each audit was conducted, the type of facility audited, the type of audit conducted, and the facility location. A Lead Auditor must have organized and/or directed at least three environmental, health or safety audits in the seven years prior to conducting the Code Certification Audit.

6. Cyanide-Related Experience

For audit team members filling the role of technical expert auditors in mining, production or transportation operations, please indicate the seven years necessary experience.

7. Signatures

Each member of the audit team, including the Lead Auditor, Technical Expert Auditors and other Auditors must sign and date the form (see Item 3. Statement of No Conflict).

8. Notarization

The Lead Auditor's signature must be certified by notarization or equivalent. Both the electronic and hard copy versions of the Auditor Credentials Form must include the notarization (see Item 9. Filing Methods).

9. Filing Methods

Submit an electronic copy of the completed and notarized Auditor Credentials Form to *audits@cyanidecode.org* AND a hard copy by mail to 1400 I Street, NW, Suite 550, Washington, DC 20005 USA.