



Enter Contract Title and Reference Number Here

Pre-Qualification Questionnaire

MODULE I

Please note that the deadline for the return of this completed document is **NOON** on *insert return date here*.

Must be completed & returned by the Tenderer

INFORMATION MEMORANDUM

Introduction

The Council intends letting a contract for the provision of (*Enter Contract Title and Reference Number Here*).

Purpose of the Information Memorandum

The purpose of this Information Memorandum is to act as a guide for bidders expressing an interest in the Contract and enable them to provide a robust response to the Council's Pre-Qualification Questionnaire (PQQ).

The London Borough of Greenwich

Greenwich Council is one of 33 London boroughs. Located in the south-east of Greater London, it includes three main town centres: Greenwich; Woolwich & Eltham.

Greenwich covers an area of more than 5,000 hectares and has a population of approximately 226,600.

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Greenwich is a borough of contrasts. It's both a major tourist destination with World Heritage Site status, and a borough with pockets of extreme deprivation. To combat the decline in certain areas the Council created local partnerships to link the Council, local community and businesses. The Council also developed strategies to foster an integrated approach to the regeneration of the borough.

Physical development of land and new transport networks has spearheaded the regeneration of Greenwich. The overall strategy seeks to maximise benefits for residents

Greenwich is also home to a number of attractions, including Cutty Sark; Greenwich Park, O2 Arena; Eltham Palace & The Thames Barrier.

Summary of Requirements:

Enter summary of requirements here include quantity (where appropriate) and contract period (including options to extend). Also include a few words about the client department and its objectives.

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INSTRUCTIONS FOR COMPLETING THIS QUESTIONNAIRE

1. General

- 1.1 The Council requires the information sought in this questionnaire from providers responding to OJEU Notice (*enter reference number*) dated (*enter date of publication*) or the advertisement in (*enter name of publication*) dated (*enter date of publication*). (Amend/Delete as required).
- 1.2 Responses to this questionnaire will be used in the first step of selecting bidders to tender. Selected bidders will be invited to participate further in the procurement process.
- 1.3 This is a competitive procurement procedure conducted in accordance with the restricted procedure under the EU Consolidated Directive 2004/18, as implemented by the UK Regulations 2006 (S.I. 2006 No:5). (Amend/Delete as required).

2. Instructions for Completion

- 2.1 Applicants must complete all Pre-Qualification Questionnaire Modules **in full** and present the information as requested together with any documentary evidence required. The Modules are:

Module 1- Financial/Technical (Sections A to G)

Module 2- Equal Opportunities (Numbers 1.1 to 1.18)

Module 3- Health & Safety (Numbers 1.1 to 1.14)

(Amend/Delete to suit)

Note: Only include Module 3 if Health & Safety is relevant to the contract

- 2.2 Prospective bidders should answer all questions as accurately and concisely as possible. Where a question is not relevant to the respondent's organisation, this should be identified, with an explanation.
- 2.3 Supporting information should be presented in the same order as, and should be referenced to the relevant question and module it relates to in the questionnaire. Please do not cross reference with your own identification, this may lead to errors during the assessment of your application.
- 2.4 Where your organisation is part of a group, questions must be answered for your organisation and not the group. Where group policies, statements etc., are specifically adopted and used by your organisation, please answer accordingly.

2.5 All submissions must be capable of being separated out for evaluation, i.e. must not be taped or bound.

2.6 Questions should be answered in English.

2.7 Your completed questionnaire and associated supporting information/documents must be returned no later than **Noon on enter date here** by POST to Strategic Procurement, Greenwich Council, P.O. Box 44884, Woolwich, London. SE18 6XE.

3. Consortia

3.1 Where a consortium is proposed, all information should be given in respect of the proposed prime bidder or consortium leader. Relevant information should also be provided in respect of consortium members or sub-contractors who will play a significant role in the delivery of the ensuing contract. Responses must enable the Council to assess the overall provision proposed.

3.2 Where the proposed prime bidders are a special purpose vehicle or holding company, the information should be provided of the extent to which it will call upon the resources and expertise of its members.

3.3 The Council recognizes that arrangements in relation to consortia may be subject to future change(s). Applicants should therefore respond in light of such arrangements as currently envisaged.

4. Communications

4.1 All questions and queries about the procurement procedure must be submitted by e-mail to *enter email details here*.

5. Timetable

Procurement Stage	Date
Issue PQQ	
Return Completed PQQ	
Completion of PQQ Evaluation	
Issue Tender	
Return Tender	
Contract Award	
Contract Commencement Date	

These dates are indicative and are subject to change.

6. Evaluation and Weighting

6.1 The objective of the selection process is to assess the responses to this questionnaire and select potential contractors to proceed to the next stage of the procurement.

6.2 Selection criteria will be a combination of both financial and non-financial factors and will consider:

Contractor acceptability

Economic and financial standing – this may involve independent financial checks.

Contractor’s ability and technical capacity – assessment of the totality of resources and core competencies available to the contractor.

Failure to provide a satisfactory response to any of the questions may result in the Council not proceeding further with the contractor.

The information supplied will be checked for completeness and compliance before responses are evaluated.

Evaluation of subsequent stages will be undertaken in accordance with the overall evaluation strategy of the project. The high level evaluation criteria will be set out in the contract documents.

Where in the opinion of the Council the response is inadequate the bidder may be excluded from further consideration.

The Council intends to award any contract based on the most economically advantageous offer. *Amend if necessary*

6.3 The weighting of the various items set out below that will be used for the evaluation are as follows:

	Criteria	Assessment
Module I –		
Section A	Corporate Information	Information Only
Section B	Economic & Financial Standing	Pass/Fail
Section C	Experience/Track Record (Technical)	e%



Enter Contract Title and Reference Number Here

Section C	Ability & Capacity (Technical)	c%
Section D	Quality Standards (Technical)	d%
Section F	Compliance with Legislation	Pass/Fail

Module 2 –

Equal Opportunities	Pass/Fail
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Module 3 –

Health & Safety	Pass/Fail
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Note: Only include Health & Safety if relevant to the Contract

Expressions of interest from prospective bidders which do not pass the “pass/fail” criteria above will be excluded from further consideration.

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MODULE 1

SECTION A - CORPORATE INFORMATION

A1. Full name of Company	
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A2. Legal Status (e.g. public limited company, limited company, sole trader, partnership, sole trader or other – please specify)	
---	--

A3. Address of registered or principal office (including post code).	
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A4. Name, address, telephone/fax number/e-mail address and position in your Company of the principal contact to which future correspondence is to be sent in connection with this questionnaire.

Name	
Address	
Telephone number	
Fax number	
E-mail address	
Position in Company	

A5. Registration number and date of registration under the Companies Act 1985 or other equivalent register.	
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Enter Contract Title and Reference Number Here

A6. Place of incorporation, registered office and principal place of business where applicable.	
--	--

A7. If your Company is a member of a group of companies, please provide the name and address of the holding Company, ultimate holding Company and other subsidiaries (please use more boxes if appropriate to do so).
--

HOLDING COMPANY	
Name	
Address	
ULTIMATE HOLDING COMPANY	
Name	
Address	
SUBSIDIARIES	
1.	
Name	
Address	
2.	
Name	
Address	

A8. Indicate the main areas of activity of your Company and the percentage of your Company's turnover which each area represents (please use more boxes if appropriate to do so).	
AREA OF ACTIVITY	% OF TURNOVER

A9. Has your Company been involved as either claimant or defendant in litigation in the last 5 years other than routine debt collection?	YES [tick below]	NO [tick below]
If YES to A9 above, please provide details of each case and the outcome, where appropriate.		

A10. Within the last 5 years have any complaints been upheld against your Company to any professional body	YES [tick below]	NO [tick below]
If YES to A10, please provide details.		

A11. Is your Company registered under the Data Protection Act 1998?	YES [tick below]	NO [tick below]
If YES to A11, please provide registration details		

A12. Applicants may utilise the experience and capabilities of its parent company in meeting the pre-qualification requirements. In such case the Applicant must supply a written statement, signed by an authorised representative of the parent company, indicating the parent company's agreement in principle to offer a parent company guarantee.

Tick in box to indicate information is provided on separate sheet(s)	
MARK SHEETS WITH NUMBER	A12

A13. Please state whether at any time you or the organisation(s) you are or were associated with has ever been subjected to a disqualification.	YES [tick below]	NO [tick below]
If YES please provide details.		

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A14. <i>Has any Director, Partner or Associate or any of their relatives been employed by this Council?</i>	YES [tick below]	NO [tick below]
If YES please provide details.		

A15. <i>Please give the names and responsibilities of the Executive Directors/Partners of your Organisation</i>

A16. <i>Please provide the names of Directors or Partners in your Organisation who have any involvement in other organisations who provide services/works to the Council and also state the names of the organisations involved.</i>

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SECTION B - ECONOMIC AND FINANCIAL STANDING

The Council will use the following information to carry out an appraisal of the Applicant’s financial position and therefore determine the level of risk that it would represent to the Council. The Council will do this with consideration of this contract requirement and value, criticality, and the nature of the market.

B1. Provide one copy of the last three audited annual reports and accounts including:

- (a) Balance Sheet
- (b) Profit and Loss Account

B2. If the accounts your Company are submitting include none for a financial year ending less than 10 months ago, does your Company confirm that the trading position now is similar?	YES [tick below]	NO [tick below]
	<input type="checkbox"/>	<input type="checkbox"/>
(a) If NO, please provide a statement of the Company’s cash flow forecast for the current year and a bank letter outlining the current cash and credit facility position.		
(b) If YES, please provide statement of turnover since the last audited accounts.		

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number B2(a) or B2(b)	B2(a) [tick below]	B2(b) [tick below]
	<input type="checkbox"/>	<input type="checkbox"/>

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B3. Please provide details and evidence of your Company's Insurance cover		
Insurance Cover	£	Expiry Date
Employer's Liability		
Public Liability		
Professional Indemnity Cover		
Please state the name and address of your Insurance Company-:		

Tick in box to indicate information is provided on separate sheet(s)	B3
MARK SHEETS WITH NUMBER	

B4. Would you be prepared to extend your Company's insurance provisions?	YES [tick below]	NO [tick below]
If YES, please provide details.		
If NO, please provide reasons		

B5. Please provide details of your Bankers		
Name		
Account Name		
Branch Address		
Number of Years Account has been open		
May bankers be approached for a reference? YES/NO		

SECTION C - EXPERIENCE / TRACK RECORD (TECHNICAL)

CI. Please provide details of any contracts that you have been awarded by Local Authorities or other Public Authorities for providing services/works similar to that being procured under this contract that we can approach for a reference (These contracts are to have been provided for at least 2 years and demonstrate an ongoing contractual relationship).

Contract 1	
Customer Name:	
Customer Address:	
Contact Name:	Contact Title:
Contact Telephone number:	
Services Provided:	Length of Contract:
Type of Work:	Total value of the contract:
Date of Contract Start:	Contract Value to Date:
% of work carried out by Sub-Contractors:	Type of sub-contractor work:
Please outline the main content of the contract and the specific requirement / inputs from your Company:	

Contract 2	
Customer Name:	
Customer Address:	
Contact Name:	Contact Title:
Contact Telephone number:	
Services Provided:	Length of Contract:
Type of Work:	Total value of the contract:
Date of Contract Start:	Contract Value to Date:
% of work carried out by Sub-Contractors:	Type of sub-contractor work:
Please outline the main content of the contract and the specific requirement / inputs from your Company:	

Enter Contract Title and Reference Number Here

Contract 3	
Customer Name:	
Customer Address:	
Contact Name:	Contact Title:
Contact Telephone number:	
Services Provided:	Length of Contract
Type of Work:	Total value of the contract:
Date of Contract Start:	Contract Value to Date:
% of work carried out by Sub-Contractors:	Type of sub-contractor work:
Please outline the main content of the contract and the specific requirement / inputs from your Company:	

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SECTION D - ABILITY AND CAPACITY (TECHNICAL)

D1. Please state the total number of permanent employees within your company. If you are including other organisations or divisions of your company in this please make this clear.

Total number of staff currently employed:			
Permanent staff numbers		Third party staff numbers	

D2. Please provide details of staff turnover as a percentage of the workforce for the last 3 years.

D3. Please state the number of staff currently involved directly in the carrying out of works/services similar to those to which this questionnaire relates

Permanent staff numbers		Third party staff numbers	
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D4. Outline the technical qualifications and ability of key staff who would work on this contract

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D5. Please enclose details of your Organisation structure, e.g. organisation chart and a chart of the Management team who will be responsible for the delivery of this contract and comment on how the contract in Greenwich would be supported and managed during the development stage and once up and running.

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Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number D5	
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D6. Please give a brief outline on your Company's policy regarding the use and management of sub-contractors and, if applicable, the extent to which your Company might envisage using them for this requirement

--

D7. Please enclose details of your Organisation procedures for training, recruiting, and induction programmes for staff

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Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number D7	
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D8. Please outline the steps your organisation will take to ensure that you are able to recruit and retain a skilled workforce for this contract.

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SECTION E - QUALITY STANDARDS (TECHNICAL)

E1. <i>Is your Organisation's Quality Assured to ISO9001 by a duly accredited body?</i>	YES [tick below]	NO [tick below]

E2. *If the answer to E.1 is "YES", please provide a copy of your accreditation certificate, a summary of your quality management system and the index of areas covered.*

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number E2	
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E3. *If the answer to E.1 is "NO", please provide full details of your own quality management system.*

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number E3	
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E4. *Does your Organisation have an environmental policy? If the answer to E.4 is "Yes", please provide a copy.*

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number E4	
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E5. Please provide details of any practical measures your Organisation has taken in the last three years to improve the environment, reduce consumption of fuel and other natural resources or reduce pollution.

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number E5	
---	--

E6. Does your Organisation operate an environmental management system such as ISO14001 or EMAS?	YES [tick below]	NO [tick below]

E7. If the answer to E.6 is "YES", please provide details.

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number E7	
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E8. Does your Organisation have a Business Continuity Plan?	YES [tick below]	NO [tick below]

E9. If the answer to E.8 is "YES", please provide a copy of your Plan.

Tick in box to indicate information is provided on separate sheet(s) Mark sheets with number E9	
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SECTION F - COMPLIANCE WITH EC LEGISLATION/UK PROCUREMENT LEGISLATION

F1. Do any of the circumstances as set out in Public Procurement (see summary below): The Public Contracts Regulation 2006, Regulation 23, apply to your company?	YES [tick below]	NO [tick below]
	<input type="checkbox"/>	<input type="checkbox"/>
If your answer in F1 was YES, please provide information as to which of the matters referred to in Regulation 23 of the Public Contract Regulations 2006 apply to the Company		

Tick in box to indicate information is provided on separate sheet(s) Mark sheet with number F1	<input type="checkbox"/>
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Appendix A

Summary of Regulation 23 of the Public Contract Regulations 2006

This summary is offered only as an indication for the convenience of bidders. Bidders should refer to the Regulations and satisfy themselves that they are not ineligible.

There are a number of grounds on which a service provider may be deemed ineligible to tender for, or be awarded a public service contract. Rejection is permissible when a service provider is in a state of bankruptcy, insolvency, compulsory winding up, administration, receivership, composition with creditors or any other analogous state or subject to relevant proceedings

In addition, Regulation 23 of the Public Contracts Regulation 2006 permits rejection of a tender if the Service Provider, its directors or any other person who has powers of representation, decision or control of the service has been convicted of any of the following offences:

- (a) conspiracy within the meaning of section 1 of the Criminal Law Act 1977 where that conspiracy relates to participation in a criminal organisation as defined in Article 2(1) of the Council Joint Action 98/733/JHA;
- (b) Corruption within the meaning of section 1 of the Public Bodies Corrupt Practices Act 1889 or section 1 of the Prevention of Corruption Act 1906;
- (c) The offence of bribery;
- (d) fraud, where the offence relates to fraud affecting the financial interests of the European Communities as defined in Article 1 of the Convention relating to the protection of the financial interests of the European Union, within the meaning of-
 - (i) The offence of cheating Revenue;
 - (ii) The offence of conspiracy to defraud;
 - (iii) Fraud or theft within the meaning of the Theft Act 1968 and the Theft Act 1978;

- (iv) Fraudulent trading within the meaning of section 458 of the Companies Act 1985;
 - (v) Defrauding the Customs within the meaning of the Customs and Excise Management Act 1979 and the Value Added Tax Act 1994;
 - (vi) An offence in connection with the taxation in the European Community within the meaning of section 71 of the Criminal Justice Act 1993; or
 - (vii) Destroying, defacing or concealing of documents or procuring the extension of a valuable security within the meaning of section 20 of the Theft Act 1968;
- (e) Money laundering within the meaning of the Money Laundering Regulation 2003; or
 - (f) Any other offence within the meaning of Article 45(1) of the Public Sector Directive as defined by the national law of any relevant state.

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SECTION G - UNDERTAKING

WHEN YOU HAVE COMPLETED THE QUESTIONNAIRE PLEASE READ AND SIGN THE SECTION BELOW: -

All contractors are required to sign the following undertaking: -

I certify that the information provided is accurate to the best of my knowledge and that I accept the conditions and undertakings requested in the questionnaire. I understand and accept that false information could result in rejection of the Company's Application.

I also understand that it is a criminal offence, punishable by imprisonment to give or offer any gifts or consideration whatsoever as an inducement or reward to any servant of a Public Body in accordance with the provisions of the Prevention of Corruption Act 1916. I also understand that any such action will empower Council to cancel any contract currently in force and will result in rejection of the Company's Application to tender and the cancellation of any contract (if awarded).

I undertake that no member, or staff, of the Company has communicated, or will communicate with any Person employed by the Council or Officer of the Council (except as listed in paragraph 15 of the Guidance Notes) or anyone authorised by him with regard to the contract award process for this services contract.

Signed for and on behalf of the Company SIGNATURE	
Name of person signing on behalf of the Company PRINT	
Position/status in the Company PRINT	
Company's name and address PRINT	
Date	



Enter Contract Title and Reference Number Here

Equal Opportunities Questionnaire

MODULE 2

Please note that the deadline for the return of this completed document is **NOON on insert return date here.**

Must be completed & returned by the Tenderer

GUIDANCE NOTES

1. Applicants must complete Questions 1.1 to 1.18 of the questionnaire and present the information as requested together with any documentary evidence required.
2. Please answer all questions, deleting 'Yes' or 'No' where appropriate. Where information/documentary evidence is provided separately, please ensure that each sheet/document is clearly marked to indicate:
 - a) The name of your Company;
 - b) The question to which it refers to in this Equal Opportunities Questionnaire.
 - c) Evidence should include but not limited to: Equal Opportunities Policy; Recruitment Policy/Procedures/Guidance; Staff Handbooks/Manuals; Disciplinary Procedures; Grievance Procedures.

EQUAL OPPORTUNITIES

1.1 Is it your policy as an employer to comply with your statutory obligations under the Race Relations Act 1976, which applies in Great Britain, or equivalent legislation that applies in the countries in which your firm employs staff?

Yes / No

1.2 Is it your policy as an employer to comply with your statutory obligations under The Race Relations (Amendment) Act 2000, which applies in Great Britain, or equivalent legislation that applies in the countries in which your firm employs staff?

Yes / No

1.3 Accordingly, is it your practice not to discriminate directly or indirectly on grounds of colour, race, nationality or ethnic or national origin in relation to decisions to recruit, select, remunerate, train, transfer, and promote employees?

Yes / No

1.4 In the last 3 years, has any finding of unlawful racial discrimination in the employment field been made against your Organisation by the employment tribunal, the employment appeal tribunal, or any court, or in comparable proceedings in any other jurisdiction?

Yes / No

1.5 In the last 3 years, has your Organisation been the subject of formal investigation by the Commission for Racial Equality, or a comparable body, on the grounds of alleged unlawful discrimination in the employment field?

Yes / No

1.6 If the answer to either 1.4 or 1.5 is “Yes” what steps did you take in consequence of that finding?

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1.7 Is your policy on race relations set out:-

- (a) in instructions to those concerned with recruitment, selection, remuneration, training and promotion?

- (b) in documents available to employees, recognised Trade Unions or other representative groups of employees?

- (c) in recruitment advertising or other literature?

1.8 If the answer to any part of 1.7 is "Yes" please enclose examples of instructions, documents, job application forms, recruitment advertisements or other literature. If enclosed please tick relevant boxes. Please ensure documentary examples are clearly marked as relating to 1.7 (a); 1.7 (b); or 1.7 (c).

Please tick for enclosure.

If your answer to (a), (b) or (c) is "No", can you provide other evidence to show how you promote race equality in employment?

Please tick for enclosure

1.9 Are staff who have managerial responsibilities required to receive training on equal opportunities?

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1.10 Do you observe, as far as possible, the Commission for Racial Equality's Code of Practice for Employment, as approved by Parliament in 1983, or comparable statutory code? Or guidance issued under equivalent legislation in countries in which you employ staff, which gives practical guidance to employees and others on the elimination of racial discrimination and the promotion of equality of opportunity in employment, including monitoring of workforce matters and steps that can be taken to encourage people from ethnic minorities to apply for jobs or take up training opportunities?

Yes / No

1.11 Is it your policy as an employer to comply with your statutory obligations under the Sex Discrimination Act 1975, as amended, the Equal Pay Act 1970, and the Disability Discrimination Act 1995 – all of which apply in Great Britain – or equivalent legislation in the countries in which you employ staff?

Yes / No

1.12 In the last three years, has any finding of unlawful sex or disability discrimination in the employment field been made against your organisation by the employment tribunal, the employment appeal tribunal, or any court, or in comparable proceedings in any other jurisdiction?

Yes / No

1.13 If the answer to question 1.12 is "yes", what steps have you taken as a result of that finding?

1.14 Is it your policy as an employer to comply with your statutory obligations under The Employment Equality Regulations 2003 (Sexual Orientation) – which applies in Great Britain – or equivalent legislation in the countries in which you employ staff?

Yes / No

1.15 Is it your policy as an employer to comply with your statutory obligations under The Employment Equality Regulations 2003 (Religion and Belief) – which applies in Great Britain – or equivalent legislation in the countries in which you employ staff?

Yes / No

- 1.16 Is it your policy as an employer to comply with your statutory obligations under The Employment Equality Regulations 2006 (Age) – which applies in Great Britain – or equivalent legislation in the countries in which you employ staff?

Yes / No

- 1.17 Please state the number of employees employed by your organisation (including Directors, apprentices etc)?

- 1.18 The Commission for Racial Equality defines ethnic minority business as ‘a business 51% or more, of which is owned by members of one ethnic minority group, or, if there are few owners, where at least 50% of the owners are members of one or more ethnic groups’. For the purpose, ethnic minority means groups other than ‘white British’.

Is your organisation an ethnic minority business in accordance with the above definition?

Yes / No

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Health and Safety Questionnaire

MODULE 3

Please note that the deadline for the return of this completed document is **NOON** *insert return date here*.

Must be completed & returned by the Tenderer

GUIDANCE NOTES

3. Applicants must complete Questions 1.1 to 1.14 of the questionnaire and present the information as requested together with any documentary evidence required.
4. Please answer all questions, deleting 'Yes' or 'No' where appropriate. Where information/documentary evidence is provided separately, please ensure that each sheet/document is clearly marked to indicate:
 - a) The name of your Company;
 - b) The question to which it refers to in this Health and Safety Questionnaire.
 - c) The full Health & Safety Policy must be submitted along with codes of practice and safe systems of work.

HEALTH & SAFETY

1.1 The Council requires that organisations on its select list shall, if requested, permit the Council to examine the organisation’s previous safety performance record including type of work undertaken and accident record.

Do you agree to make the necessary records available?

Yes / No

1.2 Does your organisation agree to be bound in its contract with the Council to any of the relevant:-

a) Health & Safety rules, procedures, approved Codes of Practice for the time being in force, e.g. British Standards, Health & Safety Executive guidance notes, etc., or European Standards and

Yes / No

b) The Council’s Local Codes of Safe Working Practices

Yes / No

1.3 Please state the number of employees employed by your organisation (including Directors, apprentices / YTS trainees, employees under the age of 18, self employed operatives, etc. Please give a breakdown as requested.

STAFF CATEGORY	Nos.
Employees under 18	
All other Employees	
Self Employed Persons	
TOTAL =	

1.4 Please enclose a copy of your Health & Safety Policy (covering General Policy; Organisation; and Arrangements) as required by Section (3) of the Health & Safety at Work Act 1974 or Local Equivalent, and any codes of safe work practices issued to employees, both general and specific to the content.

Tick to confirm enclosure

- 1.5 Has the Health & Safety Executive or equivalent body made any report(s) about the activities of your organisation?

Yes / No

If so please supply copies of the report(s), including details of prosecutions or notices served on your organisation and details of remedial action resulting from the above.

Tick to confirm enclosure

- 1.6 Please state arrangements for types of substances used and methods of use and storage employed, together with any arrangements needed for transportation. Evidence to include copies of COSHH (Control of Substances Hazardous to Health) assessments.

- 1.7 Name and Title of Senior Manager responsible for Health and safety:

- 1.8 What Health & safety consultation/communications are available to employees? Please give details:

- 1.9 Please provide details of your organisational structure for Health and Safety purposes and identify who within your organisation is responsible for monitoring the work activity for Health and Safety.

1.10 How does the person named in 1.9 effectively discharge their responsibility for Health and Safety?

<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

1.11 Please indicate procedures in use for internal and external accident reporting and investigation.

<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

1.12 Do you employ:

a) In-house health and safety personnel?

Yes / No

b) External/independent health and safety consultants / advisers?

Yes / No

1.13 If your answer to 1.12 a) or 1.12 b) above is "Yes", please give details.

<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

1.14 Would you be prepared to co-operate with and make facilities available to the Council's Health and Safety Advisors?

Yes / No

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