

Order Form
THE SUPPLY OF NON CLINICAL TEMPORARY AND FIXED TERM STAFF
FRAMEWORK CONTRACT: RM6160

CLIENT NAME:	Department for Business, Energy & Industrial Strategy (BEIS)
CLIENT ADDRESS:	Head Office, 1 Victoria Street, SW1H 0ET, United Kingdom
INVOICE ADDRESS (if different)	Queensway House, West Precinct, Billingham, TS23 2NF
CONTACT REFERENCE	Authoriser Name: Tel: Email:
ORDER NUMBER	Not yet known, TBA
SUPPLIER	MLC PARTNERS LTD
SUPPLIER'S ADDRESS	c/o WeWork, 123 Buckingham Palace Rd, London SW1W 9SH

ACCOUNT MANAGER

Name: [REDACTED]

Address: [REDACTED]

Tel: [REDACTED]

E-mail: [REDACTED]

PART 1: SERVICE REQUIREMENT	
PART 1.1: SERVICE AND DELIVERABLES REQUIRED: Temporary Worker Requirements:	
RM6160 LOT:	2
NUMBER OF ROLES REQUIRED:	1
JOB ROLE/TITLE:	Commercial Lead SOW Off-payroll working rules (IR35) do not apply
AGENDA FOR CHANGE PAY BAND:	
HOURS/DAYS REQUIRED:	37 hours per week, Mon to Fri
ANY UNSOCIAL HOURS REQUIRED? (GIVE DETAIL) [OUTSIDE 8AM TO 6PM MON TO FRIDAY]	No
ARE THERE ANY HEALTH AND SAFETY RISKS RELEVANT TO ROLE?	No
FEE TYPE:	1. Patient Facing 2. Non-Patient Facing (Disclosure) 3. Non-Patient Facing (No Disclosure)
IMMUNISATION REQUIREMENTS (FEE TYPE 1 ONLY)	N/A
	Yes / No / Not Applicable

CRIMINAL RECORDS CHECK

If yes, which level do you require?

BPSS Required

HIGH COST AREA SUPPLEMENT?	1. None 2. Inner London 3. Outer London 4. Fringe
REGULATED OR CONTROLLED ACTIVITY (ISA)?	No
SKILLS, MANDATORY & OTHER TRAINING AND QUALIFICATIONS NECESSARY TO PERFORMANCE OF THE ROLE:	
PERSON AND DEPT TO WHOM WORK-SEEKER SHOULD REPORT AT START:	
EXPENSES TO BE PAID OR BENEFITS OFFERED TO CANDIDATE:	Yes – permitted in line with policy, approved by line manager.
EXPENSES TO BE PAID BY CANDIDATE:	Travel expenses in line with Civil Service rates when required to attend a BEIS office.
ADDITIONAL REQUIREMENTS:	Remote working permitted; local office considered London.
PART 1.2: ANTICIPATED DURATION OF CONTRACT	
COMMENCEMENT DATE:	12 th January 2023
ANTICIPATED END DATE:	12 th July 2023
NOTICE PERIOD:	4 weeks
PART 1.3: MILESTONES AND KEY DELIVERABLES	
PART 1.4: CHARGES PAYABLE BY CONTRACTING AUTHORITY (INCLUDING ANY APPLICABLE DISCOUNT AND METHOD OF PAYMENT E.G. GOVERNMENT PROCUREMENT CARD OR BACS):	
TOTAL CHARGE:	
CANDIDATE NAME:	

CANDIDATE EMAIL ADDRESS:

BY SIGNING AND RETURNING THIS ORDER FORM THE SUPPLIER AGREES to enter a legally binding contract with the Contracting Authority to provide to the Contracting Authority the Services specified in the Service Order Requirements set out in this Order Form [(together with where completed and applicable, the further-competition order (additional requirements))] incorporating the rights and obligations in the Call-Off Terms and Conditions set out in the Framework Contract between the Supplier and the Authority.

FOR AND ON BEHALF OF THE SUPPLIER:

NAME:	
TITLE:	
SIGNATURE:	
DATE:	12.01.2023

FOR AND ON BEHALF OF THE CONTRACTING AUTHORITY:

NAME:	
TITLE:	
SIGNATURE:	

DATE:

Jan 12, 2023