

Contract 1.11.4.3830.



## HSE FLEXIBLE WORKFORCE SOLUTIONS FRAMEWORK ORDER FORM




### PART 1 : CLIENT INFORMATION

<b>HEALTH AND SAFETY EXECUTIVE CUSTOMER</b>	<b>HEALTH AND SAFETY EXECUTIVE</b>
<b>SERVICE ADDRESS</b>	Redgrave Court, Bootle, Liverpool L20 7HS
<b>LINE MANAGER</b>	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <div style="background-color: black; width: 20px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> </div> <div style="background-color: #cccccc; width: 100%; height: 20px; margin-bottom: 5px;"></div> <b>Email :</b> <div style="background-color: black; width: 150px; height: 15px; display: inline-block;"></div> (timesheet authorisation, as above unless stated otherwise)
<b>HSE CONTRACT REF NO.</b>	1.11.4.3830.

<b>CONTRACTOR</b>	<b>LA International</b>
<b>SERVICE ADDRESS</b>	International House Festival Way Stoke-on-Trent ST1 5UB
<b>ACCOUNT MANAGER</b>	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <b>Email :</b> <div style="background-color: black; width: 250px; height: 15px; display: inline-block;"></div>

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## PART 2 : SERVICE REQUIREMENTS

NAME OF INTERIM PERSONNEL	
FRAMEWORK DISCIPLINE AREA	BSR
JOB ROLE / TITLE	BSR Resource Manager
JOB DESCRIPTION (including details if part-time / full-time, hours of work, location)	 BSR Programme Resource Manager -
IR35 ASSESSMENT	 IR35.pdf
COMMENCEMENT DATE	12 January 2021
END DATE	31 March 2021
TERMINATION	A Termination Notice Period of one (1) weeks is applicable to this assignment, unless otherwise agreed in writing between both parties.

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**PART 3 : FEES / CHARGES****i) DAILY CHARGE RATE APPLICABLE**

<u>Date From</u>	<u>To</u>	<u>No Days</u>	<u>Candidate Daily Rate</u>	<u>Daily Agency Fee</u>	<u>Total Daily Fee</u>
12/01/2021	31/03/2021	56	£600	£85.71	£685.71
	<b>TOTAL</b>	<b>56</b>	<b>£33,600</b>	<b>£4,799.76</b>	<b>£38,399.76</b>

**ii) TRAVEL AND SUBSISTENCE**

Where appropriate, HSE will pay actual and reasonable Travel and Subsistence costs to the contracted Interim Personnel, subject to the prior approval of their HSE Line Manager and in line with the following HSE Standard Travel and Subsistence rates.



Travel and  
Subsistence Rates.doc

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## **PART 4 : INVOICING & PAYMENTS**

All invoices raised must include the relevant Purchase Order number. Failure to include the Purchase Order Number may delay payment. In all cases invoices should be submitted to the following address :

<b>INVOICING ADDRESS</b> (electronic only)	<a href="mailto:APinvoices-HAS-U@gov.sscl.com">APinvoices-HAS-U@gov.sscl.com</a>
<b>PURCHASE ORDER NO.</b> (to be quoted on all invoices)	<b><u>43070012561</u></b>

The **Contractor** shall send a copy invoice to the **HSE Contract Manager** identified at **Part 1**.

HSE shall make payment of agreed costs, in arrears, within 30 days of the acceptance of the invoice.

**Please note:** It is extremely important that your invoice is laid out as per the HSE Purchase Order, i.e. Line Numbering and Description. In doing this, you will prevent the invoice being rejected by SSCL.

If you are not advised of the PO No. within **5 working days of contract signature**, then please contact the **HSE Contract Manager**, who will be able to provide you with an update and details of when the PO will be sent to you.

**Please note:** HSE Contracts Team are not always made aware of this PO No. and therefore, to contact them will cause an added delay.

All Invoice queries must, in the first instance be taken up with **HSE's Shared Service Department, SSCL**. They can be contacted on 0345 241 5356 or 0845 241 5356 (Option 2). Alternatively, you can email them via [has-finance-ap-enquiries@gov.sscl.com](mailto:has-finance-ap-enquiries@gov.sscl.com)

If they are unable to offer you an answer to your queries, then you should contact the **HSE Contract Manager** via email, detailing the **Contract Reference No.**, the **PO No. (if you have one)**, and details of what your queries are.

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## **PART 5 : SIGNATORIES**

By signing and returning this Order Form the Contractor agrees to enter into a legally binding contract with HSE to provide the services under the terms of the Form of Agreement and specified in the Order Form.



### **IN WITNESS WHEREOF THIS CONTRACT HAS BEEN AGREED:**

DocuSigned by:  
Signature   
Name in Capitals   
Position   
Date 27/01/2021

Duly authorised to sign on behalf of

#### **LA International**

International House, Festival Way, Stoke-on-Trent, ST1 5UB

Signature   
Name in Capitals   
Position  
Date 27th January 2021

Duly authorised to sign on behalf of the

#### **HEALTH AND SAFETY EXECUTIVE**

2.3 Redgrave Court, Merton Road, Bootle, Merseyside L20 7HS