



### CONTRACTOR APPLICATION FORM

| Principal Point of Contact  |                                |
|---|--------------------------------|
| Name  |                                |
| Job Title   |                                |
| Organisation/Company Name   |                                |
| Main Address for Correspondence   |                                |
|   |                                |
| Postcode  |                                |
| Telephone Number  | Mobile                         |
| Email   |                                |
| Type of Business (i.e. Sole Trader, Partnership etc.)   |                                |
| Background  |                                |
| <p>Please provide details of current or recent contracts/provision of services relevant to this tender as well as two references below. The town council may contact these referees as part of the evaluation process any time following receipt of tender submissions and our permission to do so will be assumed:</p> |                                |
|   |                                |
| References  |                                |
| Contact Name:   | Contact Name:                  |
| Telephone:  | Telephone:                     |
| Email:  | Email:                         |
| Address:  | Address:                       |
|   |                                |
| Brief description of contract:  | Brief description of contract: |
|   |                                |



# CREDITON TOWN COUNCIL

## Accreditations/Certification

Please list any trade, or professional association that you/the organisation belongs to, with names and registration numbers

What percentage of your workforce holds a current Health & Safety Awareness Certificate? \_\_\_\_\_ %

## Training – qualified staff

Are you able to provide details of competence, training and/or qualifications held by any of your employees, if required to do so. Yes/No

## Health & Safety

Who is the appointed Health & Safety Officer?

If successful, you will be asked to:

- provide a copy of your Health and Safety Policy
- prepare and submit full risk assessments and work safety method statements

The organisation agrees to prepare and submit the following if successful:

|                              |        |
|------------------------------|--------|
| Health & Safety Policy       | Yes/No |
| Risk Assessment              | Yes/No |
| Work Safety Method Statement | Yes/No |

Has the organisation been subject to any formal notices issued by the Health & Safety Executive? Yes/No  
(If yes, please give details on a separate sheet)

## Insurance Certification

Please provide details of your organisation's insurance protection in relation to public liability and employers liability.

| Policy              | Insurer | Value (£) |
|---------------------|---------|-----------|
| Public Liability    |         |           |
| Employers Liability |         |           |

(N.B. Cover of £5,000,000 minimum is required in all instances)

If successful, you will be asked to provide the above insurance and copies of the policy documents and certificates will be required by the Council on an annual basis.



# CREDITON TOWN COUNCIL

|  |      |
|--|------|
| <b>Legal information</b>   |      |
| Are there any court actions and/or tribunal hearings outstanding against your business?<br>Yes/No                  |      |
| Has your business been involved in any court action and/or tribunal hearings over the last three years?<br>Yes/No  |      |
| If you have answered YES to either question, please provide details on a separate sheet headed 'Legal Information' |      |
| <b>Declaration</b>   |      |
| I certify that all the above information is correct.   |      |
| Signed   | Date |
| Print Name   |      |
| <b>CREDITON TOWN COUNCIL USE ONLY</b>  |      |
| Approved by:   |      |
| Signed   | Date |
| Print Name   |      |