

Bid Return Form

Quote Title: BKPC GRASS CUTTING

Quote Reference Number: BKPC 2025-2028

Cost

Reference	Title	Anticipated annual visits	Method Statement & Risk Assessment (20%)	Cost per visit (£)	Annual Cost (£)
01/28	Verge cutting	6	Yes / No (Copy enclosed)		
02/28	Cemetery				
	Sucker growth & shrubs	4	Yes / No (Copy enclosed)		
	Hedges	1	Yes / No (Copy enclosed)		
	Grass	10	Yes / No (Copy enclosed)		
03/28	Footpaths, Byways & Bridle Ways	4	Yes / No (Copy enclosed)		
04/28	Village Maintenance	Fortnightly Mar & Oct	Yes / No (Copy enclosed)		
05/28	Recreational Ground				
	Recreational ground full cut	Fortnightly Mar & Oct	Yes / No (Copy enclosed)		
	Cricket pitch only	Weekly May & Sep			
	Peripheral and Play Areas	Fortnightly Mar & Oct			
	Bordering Hedge	3			
06/28	Open Spaces				
	Grass cutting	Fortnightly Mar & Oct	Yes / No (Copy enclosed)		
	Boundary Hedges Maintenance	1	Yes / No (Copy enclosed)		
07/28	Conservation Areas	2	Yes / No (Copy enclosed)		
	Total annual cost (this must be the same as that included in section 2 of the contract document, if the amount differs the bid will be excluded from consideration)				£

Quality

The following items match the award criteria specified in the invitation to tender document. If required, please provide a simple written response. Short responses that are clear and concise are preferred. Your English and use of grammar/handwriting will not be assessed, but it needs to be clear enough to understand. Please use extra sheets as necessary. Please detail any supporting information provided.

SMA, SMB, SMC = Scoring method detailed in invitation to tender.

Question	Written statements or supporting information is required
1. (20%)	Risk assessments & method statements for all contract sections. (SMA)

2. (10%)	H&S and staff competencies	
	Who will carry out work specified in section 3, are they experienced, permanent or casual staff members. Can you confirm that the people concerned in the delivery of the specified services will be trained and competent persons? Please write a short statement below	Yes / No (SMA)
	If yes, do you have evidence of personnel safety training? Enclose a copy of the evidence.	Yes / No (SMA)
	Do you have a Health & Safety policy? If yes, enclose copy.	Yes / No (SMA)
	Have you had any involvement with HSE in the last two years. If yes, state details of accidents or HSE involvement in the last two years (use separate sheet if needed).	Yes / No (SMC)
3. (5%)	Certificates and Membership	
	Does the company/staff hold the following: -	
	Professional Body Membership, e.g. Grounds Management Association, National Association of Landscape Professionals. If yes, please detail below.	Yes / No (SMB)
	Weed control (Pesticides) certification, if yes, please enclose a copy.	Yes / No (SMB)
	Waste Management Licence, if yes, please enclose a copy.	Yes / No (SMB)
4. (10%)	Are you able to offer additional services?	
	Would you be able to support with the regular inspections, installation of play equipment, holding the relevant certification? Any additional work would be chargeable.	Yes / No (SMB)
	Would you be able to support with the installation of street furniture? Any additional work would be chargeable.	Yes / No (SMB)
	Do you have the ability and are willing to receive and store large pieces of street furniture or play equipment before installation?	Yes / No (SMB)
	If question above is yes, would there be a charge for this service?	Yes / No (SMB)
	Would you be able to support the PC with urgent grounds work? For example, removal of fallen tree or removal of damaged street furniture. Any additional work would be chargeable.	Yes / No (SMB)
5. (10%)	Please provide the names and contact details of two recent clients for whom you have provided similar services and from whom we can without further permission seek references. (SMA)	
	Referee 1:	

	Name of referee: Address: Telephone: Email: Name of person to contact (if different to referee name): A brief description of the ground's maintenance services provided/frequency:	
	Referee 2: Name of referee: Address: Telephone: Email: Name of person to contact (if different to referee name): A brief description of the ground's maintenance services provided/frequency:	
6 (5%)	Equalities of opportunity	
	Is it your policy as an employer to comply with your statutory obligations to staff and applicants for employment under all equality and non-discrimination laws?	Yes / No (SMB)
	Does your organisation have a formal equal opportunities/race relations policy? If it does, please enclose a copy.	Yes / No (SMA)
	In the last three years, has any finding of unlawful discrimination been made against your organisation by a court or industrial tribunal?	Yes / No (SMC)
	If yes, provide details and what steps were taken as a consequence of that finding?	

Closing date/time for submission of quotations: **Monday 16th December 2024 not later than 5.00pm**. No quotes will be accepted after this deadline. Quotations can be submitted earlier than the above date.

Quotations should be submitted in a plain sealed envelope for the attention of the Parish Clerk to the address provided, marked with only the quote title and reference number.

Signature:	
Name & position:	
Date:	
Contractor:	