**Framework Schedule 6 (Order Form Template and Call-Off Schedules)**

**Order Form**

CALL-OFF REFERENCE: 1.11.4.4465.

THE BUYER: HEALTH AND SAFETY EXECUTIVE

BUYER ADDRESS Redgrave Court, Merton Road, Bootle L20 7HS

THE SUPPLIER: CONEXIA LIMITED T/A PEREGRINE

SUPPLIER ADDRESS:Golden Cross House, 8 Duncannon Street, London WC2N 4JF

REGISTRATION NUMBER:03949686

DUNS NUMBER: 239606200

APPLICABLE FRAMEWORK CONTRACT

This Order Form is for the provision of the Call-Off Deliverables and dated 10 October 2023

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It is issued under the Framework Contract with the reference number RM6229 for the provision of an assessment platform and role players for HSE trainee inspector recruitment.

CALL-OFF LOT: Lot 2: Non Clinical General Recruitment

CALL-OFF INCORPORATED TERMS

The following documents are incorporated into this Call-Off Contract. Where numbers are missing, we are not using those schedules. If the documents conflict, the following order of precedence applies:

1. This Order Form including the Call-Off Special Terms and Call-Off Special Schedules.
2. Joint Schedule 1 (Definitions and Interpretation) **RM6229**
3. Framework Special Terms
4. The following Schedules in equal order of precedence:
* Joint Schedules for **RM6229**
	+ Joint Schedule 2 (Variation Form)
	+ Joint Schedule 3 (Insurance Requirements)
	+ Joint Schedule 11 (Processing Data)
* Call-Off Schedules for **1.11.4.4465**
	+ Call-Off Schedule 20 (Call-Off Specification)
1. CCS Core Terms (version 3.0.11)
2. Joint Schedule 5 (Corporate Social Responsibility) **RM6229**
3. Call-Off Schedule 4 (Call-Off Tender)

No other Supplier terms are part of the Call-Off Contract. That includes any terms written on the back of, added to this Order Form, or presented at the time of delivery.

CALL-OFF SPECIAL TERMS

Not required

CALL-OFF START DATE: **09 October 2023**

CALL-OFF EXPIRY DATE: **31 December 2023**

CALL-OFF INITIAL PERIOD: **3 months**

CALL-OFF DELIVERABLES

See details in Call-Off Schedule 20 (Call-Off Specification)

MAXIMUM LIABILITY

The limitation of liability for this Call-Off Contract is stated in Clause 11.2 of the Core Terms.

The Estimated Year 1 Charges used to calculate liability in the first Contract Year is£68,875.00

CALL-OFF CHARGES

**Total project cost: £68,875**

REIMBURSABLE EXPENSES

None

PAYMENT METHOD

All invoices raised must include the relevant Purchase Order number which will be issued by HSE Procurement Unit, each invoice must refer to and state items as listed on the Purchase Order. Failure to include the Purchase Order Number may delay payment. Invoices should be submitted electronically in PDF format to APinvoices-HAS-U@gov.sscl.com. HSE shall make payment of agreed costs via BACS, in arrears, within 30 days of the acceptance of the invoice. The Contractor shall send a copy invoice along with details of any work satisfactory carried out to the HSE representative below.

BUYER’S INVOICE ADDRESS:

Newport SSCL - Health & Safety Executive

PO Box 401

Newport

NP10 8FZ

Email: APinvoices-HAS-U@gov.sscl.com

BUYER’S AUTHORISED REPRESENTATIVE

SUPPLIER’S AUTHORISED REPRESENTATIVE

SUPPLIER’S CONTRACT MANAGER

COMMERCIALLY SENSITIVE INFORMATION

Not applicable

SERVICE CREDITS

Not applicable

ADDITIONAL INSURANCES

Not applicable

GUARANTEE

Not applicable

SOCIAL VALUE COMMITMENT

Not applicable

SIGNATORIES

|  |  |
| --- | --- |
| **For and on behalf of the Supplier:** | **For and on behalf of the Buyer:** |
| Signature: |  | Signature: |  |
| Name: |  | Name: |  |
| Role: |  | Role: |  |
| Date: |  | Date: |  |

FRAMEWORK SCHEDULES

|  |  |
| --- | --- |
| CCS Core Terms (version 3.0.6) |  |
| **JOINT SCHEDULES** |  |
| Joint Schedule 1 – Definitions v1.0 |  |
| Joint Schedule 2 – Variation Form v1 |  |
| Joint Schedule 3 – Insurance Requirements v.1 |  |
| Joint Schedule 11 - Processing Data v1.0 |  |

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| **CALL-OFF SCHEDULES** |  |
| Call-Off Schedule 4 – Call-Off Tender |  |
| Call-Off Schedule 20 - Call-Off Specification |  |