**Wetland Restoration on Cadland estate (fht) part 1 assessment document**

1. **price criteria – 20%**

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| **Required**  **outpus/deliverables (refer to Invitation to Tender Document)** | **Total Price** (£, exclusive of VAT) | **Variations** *(such as weekend work, services required next day etc.)* |
| Wetland restoration Area 1 |  |  |
| Wetland restoration Area 2 |  |  |
| Wetland restoration Area 3 |  |  |
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**Any Additional PRICING comments:**

1. **Quality criteria – 80% (SUB WEIGHTINGS FOR EACH SECTION ARE SHOWN BELOW)**

**Section A - company information**

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| **Item** | **Information required** | **Please complete or attach information requested (to be completed by the supplier)** | **Maximum mark** |
| 2.1 | Name of legal entity or sole trader in whose name the Tender/Quote is submitted |  | No Score |
| 2.2 | Registered Business Address/Head Office |  | No Score |
| 2.3 | Main Contact Name |  | No Score |
| 2.4 | Email address |  | No Score |
| 2.5 | Web address (if any) |  | No Score |
| 2.6 | Telephone Number(s) |  | No Score |
| 2.7 | VAT Registration Number |  | No Score |
| 2.8 | [D-U-N-S](http://www.dnb.co.uk/dandb-duns-number/request-a-duns-number) Number |  | No Score |
| 2.9 | Company Registration Number if registered with Companies House or equivalent |  | No Score |
| 2.10 | Name of Parent or Holding Company (if applicable) |  | No Score |
| 2.11 | Type of Business | Choose from:   * Sole Proprietor * Partnership * Private Company * PLC * Limited Company * Local Authority * Other (please specify) | No Score |
| 2.12 | If Type of Business is “Other,” please state |  | No Score |
| 2.13 | Are you a Small or Medium Enterprise (under 250 employees)? | Yes / No | No Score |
| 2.14 | Are you a Voluntary, Community or Social Enterprise? | Yes / No | No Score |
| 2.15 | Please provide details of all relevant professional qualifications and/or memberships (organisation and individuals) |  | No Score |
| 2.16 | Please give details of all insurances held and attach copies of certificates, which should state, where applicable:   * Policy No * Limit of indemnity * Excess * Limit for a single event * Expiry date | * Employers liability insurance * Public liability insurance * Professional indemnity insurance * Contractors all risk insurance | **Pass/Fail**  Levels required as described in Part 10.4 of the Terms & Conditions of Contract, for the Authority |

**Section b – YOUR APPROACH – 45%**

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| Suppliers should provide an outline of how you will draw on your experience and expertise to fulfil the requirements. Please describe how you will ensure each stump of cut scrub will be stump treated effectively with herbicide.  If applicable, please also give a brief outline of your policy regarding the use of sub-contractors and, if appropriate, the extent to which you might envisage using them for this contract. |
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**Section C – SCOPE OF SERVICES – 10%**

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| Suppliers should provide information on whether they can fulfil all the requirements and highlighting reasons for any gaps in service offered. |
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**Section D – YOUR Experience / references – 45%**

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| In this section suppliers should provide details of any qualifications/memberships held by your organisation/individual staff.  Suppliers should also provide details of at least 3 recent contracts / case studies that are relevant to our requirements (formal references are not required at this stage). |
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