



Credition Town Council

Market Street

Credition

Devon

EX17 2BN

Telephone: 01363 773717

Email: townclerk@crediton.gov.uk

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.)	
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	
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. Please note if your organisation is successful you will be required to prepare and submit full risk assessments and work safety method statements. The organisation agrees to prepare and submit the following if successful: 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)	



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Insurance Certification	
Do you currently hold the following:	
Public Liability Insurance	Yes/No
Employers Liability Insurance	Yes/No
(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.	
Corruption/Fraud	
Are there any reasons why the organisation might be, or might become, ineligible under Regulations 23 of the Public Contracts Regulations 2015. Yes/No	
(If yes, please give details on a separate sheet of paper)	
Declaration	
I certify that all the above information is correct.	
Signed	Date
Print Name	
CREDITON TOWN COUNCIL USE ONLY	
Approved by:	
Signed	Date
Print Name	