

RM971 NON MEDICAL NON CLINICAL

PART 1 – TEMPLATE ORDER FORM

ORDER FORM

THE SUPPLY OF NON MEDICAL NON CLINICAL (NMNC) TEMPORARY AND FIXED TERM STAFF FRAMEWORK AGREEMENT: RM971

FROM: *[GUIDANCE NOTE: To be populated by the Contracting Body]*

CUSTOMER	Defra -
SERVICE ADDRESS	
INVOICE ADDRESS(if different)	SSC, Department for Environment, Food & Rural Affairs PO Box 790, Newport, NP10 8FZ
CONTACT REFERENCE	
ORDER NUMBER	PO to be submitted once contract has been written up and agreed by both parties as per our No Contract No PO terms
ORDER DATE	

TO: *[GUIDANCE NOTE: To be populated by the Contracting Body]*

SERVICE PROVIDER	LA International
SERVICE PROVIDER'S ADDRESS	International House Festival Park Stoke-on-Trent Staffordshire ST1 5UB
ACCOUNT MANAGER	
PART 1: SERVICE REQUIREMENT <i>[GUIDANCE NOTE: Contracting Bodies Service requirements to be inserted in below]</i>	
PART 1.1: SERVICE AND DELIVERABLES REQUIRED: Temporary Worker Requirements:	
RM971 LOT:	5
NUMBER OF ROLES REQUIRED:	1
JOB ROLE/TITLE:	Solution Architect
AGENDA FOR CHANGE PAY BAND:	Band 10A Paypoint 10AA
AGENDA FOR CHANGE PAY POINT: (LOWEST WITHIN AFC PAY BAND UNLESS STATED)	Band 10A Paypoint 10AA
HOURS/DAYS REQUIRED:	Full time
ANY UNSOCIAL HOURS REQUIRED? (GIVE DETAIL) [OUTSIDE 8AM TO 6PM MON TO FRIDAY]	No
FEE TYPE:	1 Non-Patient Facing (Disclosure)

IMMUNISATION REQUIREMENTS (FEE TYPE 1 ONLY)	N/A
DBS REQUIRED (FEE TYPE 1 AND 2 ONLY)	1. Basic
HIGH COST AREA SUPPLEMENT?	n/a
REGULATED OR CONTROLLED ACTIVITY (ISA)?	As per Job Description supplied
SKILLS, TRAINING AND QUALIFICATIONS NECESSARY TO PERFORMANCE OF THE ROLE:	As per Job Description supplied
PERSON AND DEPT TO WHOM WORK-SEEKER SHOULD REPORT AT START:	[REDACTED]
POST CODE OF LOCATION WITH REQUIREMENT:	Warrington
RM971 LOT:	4
NUMBER OF ROLES REQUIRED:	1
JOB ROLE/TITLE:	Solution Architect
AGENDA FOR CHANGE PAY BAND:	Band 10AA Paypoint AA
ADDITIONAL REQUIREMENTS:	[GUIDANCE NOTE: Service Level Agreement etc]
PART 1.2: ANTICIPATED DURATION OF CONTRACT	
COMMENCEMENT DATE:	30/07/2018
ANTICIPATED END DATE:	01/02/2019
TEMPORARY / FIXED TERM ASSIGNMENT:	Temporary Term Assignment
PART 1.3: MILESTONES AND KEY DELIVERABLES	
As agreed with Assignment Manager	
PART 1.4: CHARGES PAYABLE BY CUSTOMER (INCLUDING ANY APPLICABLE DISCOUNT AND METHOD OF PAYMENT E.G. GOVERNMENT PROCUREMENT CARD OR BACS):	
[GUIDANCE NOTE: This should not be substantially of materially different from the Charges set out in Schedule 3 to the Framework Agreement]	
[REDACTED]	
DISCOUNTS APPLICABLE:	[GUIDANCE NOTE: Volume/Prompt Payment/Introducing Candidate]
PART 1.5: ACCEPTANCE PRIOR TO PAYMENT	
[GUIDANCE NOTE: Completion of an assignment checklist by Service Provider]	
PART 2: CUSTOMER CONTRACTUAL REQUIREMENTS	
[REDACTED]	
PART 3: FURTHER-COMPETITION ORDER - ADDITIONAL REQUIREMENTS	
[GUIDANCE NOTE: This Part 3 must only be used if a further competition is being used to select the Service Provider. Completion of this section for direct ordering is in breach of the Public Contracts Regulation 2006]	
PART 3.1: SUPPLEMENTAL REQUIREMENTS IN ADDITION TO CALL-OFF TERMS AND CONDITIONS:	As per standard terms
PART 3.2: VARIATIONS TO CALL-OFF TERMS AND CONDITIONS:	
PART 4: PERFORMANCE OF THE SERVICES AND DELIVERABLES	

PART 4.1: KEY PERSONNEL OF THE SERVICE PROVIDER TO BE INVOLVED IN THE SERVICES AND DELIVERABLES:	
PART 4.2: SUB-CONTRACTORS TO BE INVOLVED IN THE SERVICES AND DELIVERABLES:	
PART 5: CONFIDENTIAL INFORMATION	
PART 5.1: THE FOLLOWING INFORMATION SHALL BE DEEMED COMMERCIALY SENSITIVE INFORMATION OR CONFIDENTIAL INFORMATION:	

BY SIGNING AND RETURNING THIS ORDER FORM THE SERVICE PROVIDER AGREES to enter a legally binding contract with the Customer to provide to the Customer the Services specified in the Service Order Requirements set out in this Order Form [(together with where completed and applicable, the further-competition order (additional requirements)) incorporating the rights and obligations in the Call-Off Terms and Conditions set out in the Framework Agreement between the Service Provider and the Minister for the Cabinet Office.

FOR AND ON BEHALF OF THE SERVICE PROVIDER:

NAME:	
TITLE:	
SIGNATURE:	
DATE:	

FOR AND ON BEHALF OF THE CUSTOMER:

NAME:	
TITLE:	
SIGNATURE:	
DATE:	