



## HSE FLEXIBLE WORKFORCE SOLUTIONS FRAMEWORK ORDER FORM





### PART 1: CLIENT INFORMATION

HEALTH AND SAFETY EXECUTIVE CUSTOMER	
SERVICE ADDRESS	Redgrave Court, Bootle, Liverpool L20 7HS
LINE MANAGER	<div></div> Tel : <div></div> (timesheet authorisation, as above unless stated otherwise)
HSE CONTRACT REF NO.	1.11.4.3679

CONTRACTOR	LA INTERNATIONAL
SERVICE ADDRESS	FESTIVAL WAY STOKE ON TRENT  ST1 5 UB
ACCOUNT MANAGER	<div></div> <div></div> <div></div>

Contract 1.11.4.3679

**PART 2 : SERVICE REQUIREMENTS**

<b>NAME OF INTERIM PERSONNEL</b>	
<b>FRAMEWORK DISCIPLINE AREA</b>	<b>Building Safety Regulator</b>
<b>JOB ROLE / TITLE</b>	<b>Project Manager</b>
<b>JOB DESCRIPTION</b> (including details if part-time / full-time, hours of work, location)	 1.11.4.3679%20%20Job%20Description-
<b>IR35 ASSESSMENT</b>	 IR35  .pdf
<b>COMMENCEMENT DATE</b>	<b>12/08/2020</b>
<b>END DATE</b>	<b>31/03/2021</b>
<b>TERMINATION</b>	<b>A Termination Notice Period of one (1) weeks is applicable to this assignment, unless otherwise agreed in writing between both parties.</b>

**PART 3 : FEES / CHARGES****i) DAILY CHARGE RATE APPLICABLE**

<u>Date From</u>	<u>To</u>	<u>No Days</u>	<u>Candidate Daily Rate</u>	<u>Daily Agency Fee</u>	<u>Total Daily Fee</u>
12/08/2020	31/03/2021	166	£600	£70	£670
Totals					£111,220

**ii) TRAVEL AND SUBSISTENCE**

Where appropriate, HSE will pay actual and reasonable Travel and Subsistence costs to the contracted Interim Personnel, subject to the prior approval of their HSE Line Manager and in line with the following HSE Standard Travel and Subsistence rates.

**Contract 1.11.4.3679**

Travel and  
Subsistence Rates.doc

**PART 4 : INVOICING & PAYMENTS**

All invoices raised must include the relevant Purchase Order number. Failure to include the Purchase Order Number may delay payment. In all cases invoices should be submitted to the following address :

<b>INVOICING ADDRESS</b> (electronic only)	<a href="mailto:APinvoices-HAS-U@gov.sscl.com">APinvoices-HAS-U@gov.sscl.com</a>
<b>PURCHASE ORDER NO.</b> (to be quoted on all invoices)	

**PART 5 : SIGNATORIES**

By signing and returning this Order Form the Contractor agrees to enter into a legally binding contract with HSE to provide the services under the terms of the Form of Agreement and specified in the Order Form.

Contract 1.11.4.3679

IN WITNESS WHEREOF THIS CONTRACT HAS BEEN AGREED:

Signature

DocuSigned by:

3703B5FA3656474

Name in Capitals

Position

Date

11/08/2020

Duly authorised to sign on behalf of  
**LA INTERNATIONAL**  
Festival Way Stoke on Trent ST15UB  
STOKE ON TRENT

Signature

Name in Capitals

Position

Date

12/08/2020

Duly authorised to sign on behalf of the  
**HEALTH AND SAFETY EXECUTIVE**  
2.3 Redgrave Court, Merton Road, Bootle, Merseyside L20 7HS