

Stanwick Parish Council Grounds Maintenance Tender Questionnaire 2023

Thank you for responding to tender opportunity.

Introduction

The purpose of this questionnaire is to assist Stanwick Parish Council in the evaluation process of tenders for a grounds maintenance contract. It assists the Parish Council in assessing the suitability of bidders to undertake the contract.

Please answer every questions. If the question does not apply to you please write N/A.

If you do not know an answer, please write N/K

You do not need to provide supporting documents relevant to this questionnaire. However, we may ask to see these documents at a later stage. You may be asked to clarify your answers or provide more details.

This tender questionnaire forms part of your tender submission.

1	Basic Details of Your organisation	
1.1	Name of the organisation in whose name the tender is submitted	
1.2	Contact name for enquiries about this bid	
1.3	Contact position (Job Title)	
1.4	Address Post code	
1.5	Telephone number	
1.6	Email address	
1.7	Website address (if any)	
1.8	Company Registration number (if this applies)	
1.9	Registered address if different from the above Post code	
1.10	VAT Registration number	
1.11	Is your organisation: (please tick one)	i) A public limited company? ii) A limited company? iii) A partnership? iv) A sole trader? v) Other? Please specify
1.12	Name of (ultimate) parent company (if this applies)	
1.13	Companied House Registration number of parent company (if this applies)	

2	Business Activities	
2.1	What are the main business activities of your organisation?	
2.2	How many staff does your organisation have? If you are a sole trader, please say so	
2.3	<p>Do you have any experience of the following activities and is so under which contracts:</p> <p>Grassed areas Yes/No</p> <p>Flowers, shrubs, hedges, trees Yes/No</p> <p>Recreation grounds Yes/No</p> <p>Cemeteries/burial grounds Yes/No</p> <p>Graves Yes/No</p> <p>Highway verges Yes/No</p>	Which contracts?

3	References			
	Please provide details of three recent contracts that are relevant to the Authorities requirements. Where possible, at least one should be from the public sector. If you cannot provide three references, please explain why.			
		Reference 1	Reference 2	Reference 3
3.1	Customer Organisation (Name)			
3.2	Customer contact name & phone number:			
3.3	Date contract awarded			
3.4	Contract reference and brief description			
3.5	Value			
3.6	Date contract was completed			
3.7	Have you had any contracts terminated for poor performance in the last three years, or any contracts where damages have been claimed by the contracting authority?			Yes/No
3.8	If 'yes' , please give details			

4	Insurance	
	Please provide details of your current insurance cover	Value
4.1	Employers Liability	£
4.2	Public Liability:	£
4.3	Other (please provide details)	

5	Quality Assurance	
5.1	Does your organisation hold a recognised quality management certification for example BS/EN/ISO 9000 or equivalent	Yes/No
5.2	If not, does your organisation have a quality management system	Yes/No
5.3	Are you able to supply this?	Yes/No
5.4	If you do not have quality certification or a quality management system, please explain why:	

6	HEALTH & SAFETY		
	Health & Safety Policy		
		Please delete as appropriate	If yes could you provide details if asked?
6.1	Does your organisation make sure it complies with the Health & Safety at Works Act 1974	Yes/No	Yes/No
6.2	Does your organisation take steps to identify which of the regulations under the Act apply to your business?	Yes/No	Yes/No
6.3	Does your organisation have processes and procedures to ensure that these regulations are followed?	Yes/No	Yes/No
6.4	Does your organisation have a written health and safety at work policy?	Yes/No	Yes/No
	If Yes	Yes/No	Yes/No
	Is this reviewed periodically?	Yes/No	Yes/No
	Is there a signed current copy?	Yes/No	Yes/No
	Does it define Health and Safety responsibilities according to role?	Yes/No	Yes/No
6.5	Does your organisation have a health and safety at work system?	Yes/No	Yes/No
6.6	If No, to either of the above, please explain why:		
	Health & Safety: Staff Competence		
6.7	Does your organisation train staff in Health & Safety?	Yes/No	Yes/No
	If yes,		
	Does your organisation train staff in Health & Safety according to their particular job?	Yes/No	Yes/No
	Does your organisation provide the following types of training?		
	Health & Safety Induction	Yes/No	Yes/No
	Hazard Awareness	Yes/No	Yes/No
	Accident Reporting	Yes/No	Yes/No

	Other training depending on nature of work and risk assessment	Yes/No	Yes/No
6.8	Does your organisations keep Health & Safety training records for staff?	Yes/No	Yes/No
	Health & Safety: Consulting Staff		
6.9	Does your organisation have a clear process for consulting staff on Health & Safety matters	Yes/No	Yes/No
	If Yes		
	Is this a consultation process set out in your health & safety procedures?	Yes/No	Yes/No
	Does your organisation have a staff Health & Safety representative?	Yes/No	Yes/No
	Does your organisation have clear arrangements for staff to report Health & Safety risks and issues to managers?	Yes/No	Yes/No
	Health & Safety: Risk Assessment		
6.10	Does your organisation have a risk assessment process?	Yes/No	Yes/No
	If Yes		
	Does your organisation record the findings?	Yes/No	Yes/No
	Are they regularly reviewed?	Yes/No	Yes/No
	Does your organisation produce method statements of how work safely, based on risk assessments?	Yes/No	Yes/No
	Does your organisation have procedures to make sure staff understand these method statements?	Yes/No	Yes/No
6.11	Does your organisation have method statements and procedures to cover the use of all plant, machinery and equipment?	Yes/No	Yes/No
6.12	Does your organisation apply risk assessments to each new type/process/machinery/area of work?	Yes/No	Yes/No
	Health & Safety: Advice		
6.13	Does your organisation have access to competent Health & Safety Advice? (either within the organisation or external)	Yes/No	Yes/No
6.14	Do you belong to any safety organisations? E.g. RoSPA, British Safety Council	Yes/No	Yes/No
	Health & Safety: Accident Reports		
6.15	Does your organisation report incidents and accidents when required under RIDDOR?	Yes/No	Yes/No
6.16	Does your organisation keep RIDDOR records? (copies of reporting forms)	Yes/No	Yes/No

6.17	Does your organisation keep statistics of accidents/incidents?	Yes/No	Yes/No
6.18	Does your organisation keep statistics of subcontractor's accidents/incidents? (if this applies)	Yes/No	Yes/No
6.19	Does your organisation make sure you learn from incidents/accidents and change your working practices as necessary?	Yes/No	Yes/No
	Health Risk Management		
6.20	Does your organisation have a nominated manager to whom any employee health problems can be reported?	Yes/No	Yes/No
6.21	Does your organisation provide any necessary personal protective equipment to staff free of charge?	Yes/No	Yes/No
	Health & Safety Enforcement		
6.22	Has your organisation had any HSE or Local Authority Improvement or Prohibition Notice or warning letter in the last three years?	Yes/No	Yes/No
6.23	Does your organisation keep records of all such notices/warnings for three years?	Yes/No/ N/A	Yes/No
6.24	If your organisation has had any such Notices or warnings has it put things in place to prevent it happening again?	Yes/No/ N/A	Yes/No
6.25	Please explain the measures you have taken to put things right (if applicable)		

7	Equal Opportunities		
7.1	Is it your policy as an employer to comply with the Equality Act 2010	Yes/No	
7.2	Does your organisation have a written Equality Policy to avoid discrimination? Are you able to supply this if asked?	Yes/No Yes/No	

8	Professional and Business Standing		
	Do any of the following apply to your organisation, or to (any of) the directors(s)/ partners(s)/ proprietor(s)?		
8.1	Is in a state of bankruptcy, insolvency, compulsory winding up, receivership, composition with creditors or subject to relevant proceedings?	Yes/No	
8.2	Has been convicted of a criminal offence related to business or professional conduct?	Yes/No	

8.3	Has committed an act of grave misconduct in the course of business or professional conduct?	Yes/No
8.4	Has not fulfilled obligations related to payments of national insurance contributions?	Yes/No
8.5	Has not fulfilled obligations related to payments of taxes?	Yes/No
8.6	Is guilty of serious misrepresentation in supplying information?	Yes/No
8.7	Is not in possession of relevant licences or membership of an appropriate organisation where required by law?	Yes/No
8.8	If the answer to any of these is yes, please give brief details below, including what has been done to put things right.	
8.9	Is your organisation a member of a professional body? If so, which?	

9	I declare that to the best of my knowledge the answers submitted in the questionnaire are correct. I understand that this information will be used in the evaluation process.
	FORM COMPLETED BY
9.1	Name:
9.2	Position (job title)
9.3	Date:
9.4	Telephone number:
9.5	Email Address
9.6	Signature