



LUTTERWORTH TOWN COUNCIL

Grounds Maintenance Tender (ref. 2019)

SUITABILITY ASSESSMENT QUESTIONNAIRE - PART TWO

RESPONSE DOCUMENT

In order to simplify this process, you do not need to provide certain supporting documents, for example, accounts, statements or policies with this questionnaire. **However, we may ask to see these documents at a later stage.** You may also be asked to clarify your answers or provide more details.

Please answer every question. If the question does not apply to you please write N/A; if you don't know the answer please write N/K.

When completed, please return Part Two of the SAQ in **one (1) hard copy and with one (1) CD copy of the files**, in a package, marked only with **SAQ RESPONSE GROUNDS MAINTENANCE** with no company markings to:

Town Clerk

Lutterworth Town Council

Council Offices

Coventry Road

Lutterworth

Leicestershire LE17 4SH

Not later than 12:00 noon on **Monday 19 November 2018**

LATE SUBMISSIONS WILL BE DISREGARDED

CONTENTS

	<u>Page</u>
Suitability Assessment Questionnaire	3
Declaration	14
Mandatory Attachments Checklist	14

SUITABILITY ASSESSMENT QUESTIONNAIRE

SECTION 1 – COMPANY IDENTITY		
1.1	Name of applicant lead company:	
1.2	Company address & postcode:	
1.3	Contact name and job title:	
1.4	Office telephone number:	
1.5	Mobile telephone number:	
1.6	Fax number:	
1.7	E- mail address:	
1.8	Website address:	

SECTION 2 – GENERAL COMPANY INFORMATION			
2.1	Is your company a:	public limited company?	
		limited company?	
		partnership?	
		sole trader?	
2.2	If your company is none of the above, please specify:		
2.3	Company registration number:		
2.4	Date of registration:		
2.5	VAT registration number:	PAYE collection number:	Corporation tax number:
2.6	Registered address if different from address detailed in question 1.2:		
2.7	Is your company registered under the Data Protection Act 1998? If Yes, please provide your registration number:		Yes/No
2.8	Does your company's business have a continuity plan i.e. disaster recovery / IT back ups?		Yes/No
2.9	Provide the names of company directors:		
2.10	Have any of the company's directors/partners been disqualified from acting as directors of any company under the provisions of the Company Directors Disqualification Act 1986? If yes, please provide full details		Yes/No
2.11	Have any company directors / partners been convicted of a criminal offence relevant to their business or profession? If yes, please provide full details		Yes/No
2.12	Have any company directors / partners been declared personally bankrupt? If yes, please provide full details		Yes/No

Lutterworth Town Council – SAQ Grounds Maintenance – PART 2

2.13	<p>If a group company – please provide parent company details:</p> <p>Registration number of parent company:</p> <p>Parent company name:</p> <p>Parent company address:</p>	Not applicable/ Yes/No
2.14	<p>A parent company guarantee or performance bond will be required:</p> <p>Can you offer a parent company guarantee?</p> <p>Can you offer a performance bond?</p>	<p>Yes/No</p> <p>Yes/No</p>
2.15	<p>Please provide details of any memberships of trade associations:</p> <p>Please give the registration number(s):</p>	
2.16	<p>Does your company have a written training policy?</p>	Yes/No
2.17	<p>Does your company have a written corporate responsibility policy?</p> <p>If Yes provide details of the policy and how you implement it.</p>	Yes/No
2.18	<p>Please provide a brief history of your company and its core business activities; the company's future corporate strategy, including any significant financial factors:</p> <p>This should not exceed two A4 pages.</p>	
2.19	<p>Provide an organisational structure of your relevant business and regional offices (if applicable) detailing each location, turnover by location, management structure, key support staff.</p> <p>This should be broken down into those who are directly employed and those which are agency staff or sub-contracted.</p> <p>Tabulate the following categories:</p> <ul style="list-style-type: none"> • Total number of employees • Management • Administration • Operatives 	
2.20	<p>Provide details of staff turnover as a percentage for the past three years:</p>	

Lutterworth Town Council – SAQ Grounds Maintenance – PART 2

2.21	Provide details of current contracts, the nature of the contract and value.	
	Contract 1	
	Value of contract 1	
	Date of expiry of contract 1	
	Contract 2	
	Value of contract 2	
	Date of expiry of contract 2	
	Contract 3	
	Value of contract 3	
	Date of expiry of contract 3	
Additional contracts can be added		

SECTION 3 – PRIME CONTRACTOR / SUB CONTRACTORS

3.1	Please tick the box below which applies:	
a)	Your company will bid to provide the services required	
b)	Your company will bid in the role of principal contractor and intends to use third parties to provide some of the services required by the council.	
3.2	If your answer to 3.1 (b) is Yes, please identify intended subcontractors/partners for the bid (if currently known) below:	
Company name	Company address and contact details	Service provision responsibility

SECTION 4 – FINANCIAL INFORMATION

	<p>This section asks for some financial figures about your organisation, (and the ultimate holding company if there is one). If you are able to answer these questions, the authority will not usually need to ask you to send accounts at this stage.</p> <p>Please provide the figures for the two most recent years (if available):</p>		
4.1		Applicant	Parent company consolidated (if applicable)
4.2	Please indicate the turnover of the organisation for the past two years:	<p>£..... for year ended __/__/__</p> <p>£..... for year ended __/__/__</p>	<p>£..... for year ended __/__/__</p> <p>£..... for year ended __/__/__</p>
4.3	What was the pre-tax profit (or loss) for the last two years?	<p>£..... for year ended __/__/__</p> <p>£..... for year ended __/__/__</p>	<p>£..... for year ended __/__/__</p> <p>£..... for year ended __/__/__</p>
4.4	What was the organisation's net worth / shareholders funds (or net liabilities) at the date of the latest accounts?	£..... at __/__/__	£..... at __/__/__
4.5	What is your present cash and credit position?	<p>£..... cash (overdraft) at __/__/__</p> <p>Available credit facility £..... at __/__/__</p>	<p>£..... cash (overdraft) at __/__/__</p> <p>Available credit facility £..... at __/__/__</p>
4.6	Has your organisation met the terms of its banking facilities and loan agreements (if any) during the past year?	Yes / No	
4.7	If "No" what were the reasons, and what has been done to put things right?		

Lutterworth Town Council – SAQ Grounds Maintenance – PART 2

4.8	Has your organisation met all its obligations to pay its creditors and staff during the past year?	Yes / No
4.9	If "No" please explain why not:	
4.10	What is the name and branch of your bankers (who could provide a reference)?	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Name:</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Branch:</div> <div style="border: 1px solid black; padding: 2px;">Contact details:</div>
4.11	If asked, would you be able to provide at least one of the following?	
	<i>A copy of your most recent audited accounts (for the last two years if this applies)</i>	Yes / No
	<i>A statement of your turnover, profit & loss account and cash flow for the most recent year of trading</i>	Yes / No
	<i>A statement of your cash flow forecast for the current year and a bank letter outlining the current cash and credit position</i>	Yes / No

SECTION 5 – HEALTH AND SAFETY

Please note that the council may wish to audit the company's health & safety, environmental and management systems at any time. In the event that this is unacceptable, the company should clearly state its objection at the time of returning the suitability assessment documentation.

5.1	Please provide a copy of your company's health & safety policy statement and organisational arrangements for its implementation:	
5.2	Does your company have a health & safety system accredited to BS8800 or equivalent?	Yes/No
5.3	Does your company have a specific director, partner or other person responsible for the implementation of your company's safety policy? If yes provide details:	Yes/No

Lutterworth Town Council – SAQ Grounds Maintenance – PART 2

5.4	Does your company employ a full time health & safety professional or health & safety consultant? If yes, please provide details of the qualifications, experience and membership of an appropriate professional body. If no, please indicate who provides advice on health and safety:	Yes/No
5.5	Does your company provide health & safety training to: a) Staff b) Sub-contractors If yes, please provide details of the content and type of training e.g. induction, management, task specific, etc.:	Yes/No Yes/No
5.6	Does your company maintain accident records?	Yes/No
5.7	Do you consult staff on health and safety matters? If so, how?	Yes/No
5.8	Do you undertake risk assessments? How are these undertaken?	
5.9	Has your company over the past 5 years been or is in the process of being investigated/prosecuted for any health & safety or environmental offence? If yes, provide details:	Yes/No
5.10	Has your company over the past 5 years been or is in the process of having any civil action brought against it for any health & safety offence? If yes, provide details:	Yes/No
5.11	Has your company been served with any prohibition / improvement notices for breaches of health and safety legislation in the past 3 years? If so, please provide details including subsequent action taken by the company:	Yes/No

PART 6 – ENVIRONMENTAL

6.1	Does your company have an environmental policy? If Yes, please provide a copy:	Yes/No Included Yes/No
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Lutterworth Town Council – SAQ Grounds Maintenance – PART 2

6.2	How does your company deal with waste and recyclable materials arising from the grounds maintenance service?	
6.3	<p>Has your company or any director over the past 5 years been convicted of a criminal offence or been found guilty of grave misconduct with regard to any environmental legislation or is in the process of having any civil action brought against it for any environmental offence:</p> <p>If Yes, provide details:</p>	<p>Yes/No</p> <p>Included Yes/No</p>
6.4	<p>Does your company check the environmental performance of your sub-contractors?</p> <p>If Yes, please provide details of the system and processes:</p>	Yes/No

SECTION 7 – REFERENCES

Please note that the council may contact the client organisations for references, unless the applicant company clearly states that this is not acceptable.

7.1	<ul style="list-style-type: none"> • Please provide details of three recent contracts that are relevant to the council's requirement. • If you cannot provide three references, please provide the reasons why. <p>Please note:</p> <p>The references you provide will not be evaluated as part of the suitability assessment exercise, but will be taken up during the tender process, should your organisation be deemed to meet the requirements.</p>			
	Client	Reference 1	Reference 2	Reference 3
	Company name:			
	Contact name:			
	Contact e-mail:			
	Contact telephone:			

Lutterworth Town Council – SAQ Grounds Maintenance – PART 2

	Client	Reference 1	Reference 2	Reference 3
	Contract award date:			
	Brief description of contract:			
	Contract value:			
	Length of contract:			

SECTION 8 – DISPUTES

8.1	Provide details for the last three years, of contracts where there has been a failure to complete the contract on time or at all, or where there have been claims for damages, or where damages have been deducted or recovered or where you are currently in dispute with any companies. Also details of any contracts terminated:		
	Client name and address	Contract reference and brief description of works	Date of claim / contract termination
			Reason for claim termination
8.2	Are there any court actions and/ or significant employment tribunal hearings outstanding against your company? If Yes please provide details:		Yes/No
8.3	Has your company ever had a contract terminated or your employment determined for whatever reason under the terms of a contract? If Yes please provide details:		Yes/No

SECTION 9 – QUALITY ASSURANCE

Please note that the council may wish to audit the company's quality assurance manual and management systems at any time.

In the event that this is unacceptable, the company should clearly state its objection at the time of returning the suitability assessment documentation.

	Is your company accredited to ISO 9001/9002 or equivalent?	Yes/No
9.1	<p>If Yes, please state:</p> <p>(a) Registration no.: (b) Accreditation body: (c) Date of registration: (d) Date of last surveillance or audit:</p> <p>If no, are you working towards accreditation and if so when do you expect to achieve accreditation?</p>	
9.2	What quality targets do you monitor?	
9.3	<p>If your company does intend to use sub-contractors to provide any of the services required for the completion of the works, please list the service provision responsibility and the extent to which you envisage using the sub contractors to provide any of the service:</p> <p>Please also provide the company name, address and contact details:</p>	

SECTION 10 – INSURANCE

10.1	Please provide details of your current insurance cover:	Value
10.2	<p>Public Liability Insurance:</p> <p>Please provide a copy of the certificate</p>	£
10.3	<p>Employers Liability Insurance:</p> <p>Please provide a copy of the certificate:</p>	£
10.4	<p>Professional Indemnity Insurance (if applicable):</p> <p>If applicable, please provide a copy of the certificate:</p>	£
10.5	<p>Other insurance (please specify):</p> <p>If applicable, please provide a copy of the certificate:</p>	£

SECTION 11 – DUTY AS AN EMPLOYER

11.1	<p>Please give details of any notifiable judgements against you or your company, within the last 3 years, under any of the following acts:</p> <ul style="list-style-type: none"> • Equal Pay Act 1970 (Amended) • Sex Discrimination Act 1975 (Amended) • Race Relations Act 1976 • Employment Equality (Sexual Orientation) Regulations 2003 • Disability Discrimination Act 2005 • Employment Equality (Age) Regulations 2006 • Equality Act 2006 • Single Equality Act 2010 	
11.2	<p>Personnel may be required to be CRB checked. Please provide assurance that this process will be adhered to, where required:</p>	<p>Yes/No</p>

SECTION 12 – COMPLIANCE WITH EU LEGISLATION / UK PROCUREMENT LEGISLATION

12.1	<p>Do any of the eligibility circumstances as set out in The Public Contracts Regulations 2015 apply to your company? The council may seek evidence at a later date, in confirmation of your answer.</p>	<p>Yes/No</p>
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SECTION 13 – DECLARATION

13.1 A declaration in the form specified below must be completed:

I/We certify that the information supplied in this application is complete and accurate to the best of my/our knowledge and belief. I/We understand that false or incomplete information may result in my/our exclusion from the list of tenderers.

Signed.....

Printed Name.....

Position in Company.....

For and on behalf of.....

NOTES:

This application should be signed by the applicant in person or by a duly authorised partner in the case of a partnership, or by a duly authorised Director or Company Secretary in the case of a Limited Company.

Before returning this form, please ensure that you have answered all the questions in the sections required and enclosed copies of all relevant documents. Failure to do so may result in your exclusion from the list of tenderers.

SECTION 14 – MANDATORY ATTACHMENTS CHECKLIST

It is essential that the company answers **all** questions in this SAQ and that all information requested is submitted. If this is not done, then an application may be disqualified. If a question is not applicable please state this in the relevant box together with an explanation of why it is not applicable.

14.1	Question 2.19	Organisational structure and staff details	Yes / No
	Question 5.1	Health & Safety Policy & arrangements for implementation	Yes / No
	Question 7.1	References	Yes/No
	Question 10	Insurance certificates	Yes/No