Cleaning and maintenance of Church St Public Toilets, Hungerford

TOTAL PROJECT COST as per specificat	on and drawings provided
£	
We give this tender to the Employer fre	ontract will run from 1st Sept 2017 until 31st Aug 2020. e of charge and understand that the Employer does not bind er. The tender is to remain open for acceptance for one month.
Signed:	Date:
On behalf of:	

TENDERING PROGRAMME

The following represents the indicative timescale for the key stages of the tender process. These dates may be subject to change: -

Issue tenders – 27^{th} June 2017 Tender return deadline – Friday 4^{th} August 2017 Tender evaluation – between 7^{th} August 2017 and 8th August 2017 Contract Award – 9^{th} August 2017 Contract start – 1^{st} Sept 2017 Contract finish – 31^{st} Aug 2020

Notes for completion:

Please answer every question. Failure to do so may result in your application being disqualified. If the question does not apply to you please write N/A; if you don't know the answer please write N/K. "Authority" means the purchasing organisation that is seeking to award a contract.

"You" / "Your" or "Potential Provider" means the business or company which is completing this tender.

Your completed application should be returned via post to be received by no later than Friday 4th August 2017 and submitted in an envelope marked "Tender – Church St Public Toilets", addressed to: Hungerford Town Council

The Library, Church St Hungerford, Berkshire RG17 OJG

Alternatively, your completed application can be returned by email to townclerk@hungerford-tc.gov.uk with subject heading "Tender – Church St Public Toilets". Verification of Information Provided:

Not all questions require supporting documents up front at this stage. However, the purchasing organisation may ask to see these documents at a later stage, so it is advisable you ensure they can be made available upon request. You may also be asked to clarify your answers or provide more details about certain issues.

FORM A: ORGANISATION AND CONTACT DETAILS

Full name of organisation		
wishing to tender		
Registered office address		
Company or charity		
registration number		
Date of registration		
VAT registration number		
Name of immediate parent		
company		
Name of ultimate parent		
company		
		Please tick
Type of organisation	i) a public limited co.	
	ii) a limited company	
	iii) a limited liability partnership	
	iv) other partnership	
	v) sole trader	
	vi) other (please specify)	

FORM B: GROUNDS FOR MANDATORY REJECTION

Important Notice:

In some circumstances the Authority is required by law to exclude you from participating further in a procurement. If you cannot answer 'No' to every question it is very unlikely that your application will be accepted.

Please state 'Yes' or 'No' to each question.

	Answer
Has your organisation or any directors or partner or any other person who has powers	
of representation, decision or control been	
convicted of any of the following offences?	
Answer "Yes" only if they have been convicted	
(a) Conspiracy	Yes / No
(b) Corruption	Yes / No
(c) Bribery	Yes / No
(d) Fraud (including not paying taxes or social security contributions)	Yes / No
(e) Money laundering within the meaning of	Yes / No
Money Laundering Regulations 2003 or Money	
Laundering Regulations 2007; or	
(f) Any other offence within the meaning of	Yes / No
Article 45(1) of Directive 2004/18/EC as	
defined by the national law of any relevant	
State	

FORM C: GROUNDS FOR DISCRETIONARY REJECTION

Important Notice:

The Authority is entitled to exclude you from consideration if any of the following apply but may decide to allow you to proceed further.

Please state 'Yes' or 'No' to each question.

Has your organisation or any other director or partner	
(a) been convicted of a criminal offence relating to the conduct of your business or profession;	Yes / No
(b) committed an act of grave misconduct in the course of your business or profession;	Yes / No
(c) failed to fulfil obligations relating to the payment of social security contributions under the law of any part of the United Kingdom or of the relevant State in which you are established;	Yes / No
(d) failed to fulfil obligations relating to the payment of taxes under the law of any part of the United Kingdom or the relevant State in which you are established; or	Yes / No
(e) been guilty of serious misrepresentation in providing any information required of you under Regulation 23 of the Public Contracts Regulations 2006?	Yes / No

FORM D: FINANCIAL INFORMATION

(a) TURNOVER

Please summarise the annual turnover of your organisation over the last 3 years. If your organisation is part of a Group please supply figures for both your own organisation and the Group.

OWN ORGANISATION

Year	GBP £
Year	GBP £
Year	GBP £
GROUP	
Year	GBP £
Year	GBP £

Year GBP £
A copy of your audited accounts for the most recent two years may be requested.
(b) INSURANCE Please provide details of your current levels of insurance for the following:-
Public Liability Insurance Insured up to GBP £for any one event
Employers Liability Insurance Insured up to GBP £ for any one event
Professional Indemnity Insurance Insured up to GBP £
Evidence of your valid insurance policies will be requested before any contract is awarded
FORM F. TECHNICAL AND DROFESSIONAL ARILITY

FORM E: TECHNICAL AND PROFESSIONAL ABILITY

(a) EXPERIENCE AND CONTRACT EXAMPLES

Please provide details of up to three contracts from either the public or private sector (or both), that have been completed in the past **three** years.

	Contract 1	Contract 2	Contract 3
Customer			
Organisation			
(name):			
Customer contact			
name, phone			
number and email			
Contract			
completion date			
Contract Value			
Brief description			
of contract			

If you do not wish the Authority to contact any of the above-mentioned customers for reference then please state

(b) STAFFING

How many staff does y	our organisation employ?	

(C) QUALITY ASSURANCE

(c.1) Does the relevant section of your	Yes / No
organisation hold a recognised quality	
management certificate, for example ISO 9001 or	
equivalent?	
(c.2) If "Yes", please enclose a copy of the	
certificate.	
(c.3) If "No", please describe any actions you take	Yes / No
to ensure quality is consistently monitored and	
maintained throughout your organisation.	
(c.4) Is your organisation a member of any	If "Yes",
relevant professional / trade associations?	please state.

(d) HEALTH AND SAFETY

(d.1) Does the relevant section of your	Yes / No
organisation hold a recognised Health and Safety	
management system certificate?	
(d.2) If "Yes", please enclose a copy of the	
certificate.	
(d.3) Do you have a company Health and Safety	Yes / No
policy?	
(d.4) If "Yes", please enclose a copy with your	
response.	
(d.5) If "No", please briefly describe what	
arrangements you have made to manage Health	
and Safety within your organisation.	
(d.6) Have you been the subject of any	Yes / No
Improvement or Prohibition Notice or	
prosecution or been a defendant in any case	
brought under Health and Safety legislation	
within the last three years?	
(d.7) If "Yes", please provide details	

(e) ENVIRONMENTAL MANAGEMENT

(e.1) Does your organisation hold a recognised	Yes / No
environmental management systems certificate,	
for example ISO 14001 or equivalent?	
(e.2) If "Yes", please enclose a copy of the	
certificate.	
(e.3) If "No", please describe any actions your	
organisation currently undertakes to demonstrate	
a responsible attitude towards environmental	
management	

(f) EQUAL OPPORTUNITIES

(f.1) Does your organisation have an Equal	Yes / No
Opportunities policy?	
(f.2) Does your organisation ensure that it	Yes / No
remains compliant and up to date with the	
Equality Act 2010?	

g) UNDERTAKING

I declare that to the best of my knowledge the answers submitted in this tender are correct. I understand that the information will be used in the process to assess my organisation's suitability to be invited to tender for the Authority's requirement and I am signing on behalf of my organisation. I understand that the Contracting Authority may reject this tender if there is a failure to answer all relevant questions fully or if I provide false/misleading information.

FORM COMPLETED BY	
(g.1)	Name:
(g.2)	Date:
(g.3)	Signature: