

Section – Compulsory

A. Organisation Information

Organisation Name

Legal Status / Form of Ownership:

Companies House Registration Number:

Registration Date:

DD	MM	YYYY
----	----	------

Date Established:

DD	MM	YYYY
----	----	------

Registered Office:

Website:

Holding Company / Organisations:

Subsidiary / Linked Organisations:

Do you have a Parent Company?

 YES NO

If yes, please provide:

Parent Company Name

Parent Company House registration No

Is your organisation VAT registered?

 NO YES VAT number

Construction Industry Scheme (CIS) details (sub-contractors only)

Until completed we are unable to make ANY payments, as per IR14/15(CIS)

Unique Tax Reference (UTR) number

National Insurance number (Sole trader/
registering partner)

Name of Registering Partner (Partnership only)

Section - Compulsory

B. Contact Details

Office Nominated for this work:

Contact Name *(Nominated single point of contact)*

Position:

Telephone Number:

Fax Number:

E-mail Address:

C. Eligibility of Company

Have any of the Directors, Partners, Proprietors or Associates been involved in any companies (e.g. company or firms) which may be ineligible and may be excluded from participating in a Contract by reason of the criteria listed below?

- | | |
|--|----------|
| a) Bankruptcy | YES / NO |
| b) Insolvency or subject of a sequestration Petition. | YES / NO |
| c) Being in receivership or subject to a Winding-up order | YES / NO |
| d) Conviction of a criminal offence relating to the conduct of the business or profession | YES / NO |
| e) Committing an act of grave misconduct in the course of a business or profession | YES / NO |
| f) Failure to fulfil social security payment obligations | YES / NO |
| g) Failure to fulfil obligations in respect of payment of taxes | YES / NO |
| h) Serious misrepresentation of information concerning eligibility, economic and financial Standing and technical capacity of the Company/Firm | YES / NO |
| i) Conviction of candidate (including any proposed guarantor), or their directors or nay other persons who has power of representation, decision or control of the candidate, in relation to any of the offences listed in Regulation 23(1) of the Public Contract Regulations 2006. | YES / NO |

If you have answered 'Yes' in any of the above, please provide additional details. Use additional sheets as necessary.

Section 1 - Company details

1.1 Trade Activity

Please state your core business trades (Tick as appropriate):

Consultants	<input type="checkbox"/>	Lifts	<input type="checkbox"/>
Brick / Blockwork	<input type="checkbox"/>	LO Joinery	<input type="checkbox"/>
Ceramic Tiling	<input type="checkbox"/>	Mastic Sealant	<input type="checkbox"/>
Cleaning	<input type="checkbox"/>	Mechanical / Ventilation	<input type="checkbox"/>
Concrete works	<input type="checkbox"/>	Metalwork	<input type="checkbox"/>
Cubicles / Washrooms	<input type="checkbox"/>	Painting / decorating	<input type="checkbox"/>
Demolition / Alterations	<input type="checkbox"/>	Paving / Flagging	<input type="checkbox"/>
Drainage	<input type="checkbox"/>	PC Floors / Stairs	<input type="checkbox"/>
Electrical	<input type="checkbox"/>	Plastering / Drylining	<input type="checkbox"/>
Excavation/Earthworks	<input type="checkbox"/>	Plumbing	<input type="checkbox"/>
Fencing	<input type="checkbox"/>	Roofing	<input type="checkbox"/>
Fire Protection	<input type="checkbox"/>	Scaffolding	<input type="checkbox"/>
Fixed Seating	<input type="checkbox"/>	Screeding	<input type="checkbox"/>
Flooring	<input type="checkbox"/>	Security	<input type="checkbox"/>
French Polishing	<input type="checkbox"/>	Signage	<input type="checkbox"/>
Furnishings / Curtains	<input type="checkbox"/>	Structural Steelwork	<input type="checkbox"/>
Glazing	<input type="checkbox"/>	Suspended Ceilings	<input type="checkbox"/>
Insulation	<input type="checkbox"/>	Tarmac	<input type="checkbox"/>
Landscaping	<input type="checkbox"/>	Temp services	<input type="checkbox"/>
		Other	<input type="checkbox"/>

Do you have manufacturing capabilities ? YES NO

Do you install and fix capabilities ? YES NO

1.2 Geographical coverage

Please indicate where work can be undertaken (Tick as appropriate):

North West (England)	<input type="checkbox"/>	Wales	<input type="checkbox"/>
North East (England)	<input type="checkbox"/>	Scotland	<input type="checkbox"/>
Midlands (England)	<input type="checkbox"/>	Northern Ireland	<input type="checkbox"/>
South West (England)	<input type="checkbox"/>	Republic of Ireland	<input type="checkbox"/>
South East (England)	<input type="checkbox"/>	Europe	<input type="checkbox"/>
Greater London (England)	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>

1.3 Staff Numbers

Please state the number of your employees engaged in the following activities. Those in a dual role (or similar) should be placed in the most appropriate category.

Support Staff	2010	2011	Present
Directors			
Managers			
Senior Technical Staff			
Technical Staff			
Technical Support			
Administration			
<i>total</i>			

Site Staff	2010	2011	Present
Directors			
Managers			
Senior Technical Staff			
Technical Staff			
Technical Support			
Administration			
<i>total</i>			

Do you employ additional staff on a sub-contract basis? YES NO

Please indicate how you manage these sub-contract staff.

Section 2 – Health & Safety

2.1 Contractors Health & Safety Assessment Scheme (CHAS)

Is your organisation registered with CHAS?

CHAS compliant	<input type="checkbox"/>	Certificate number*	<input type="text"/>
CHAS accredited	<input type="checkbox"/>	Certificate number*	<input type="text"/>
Not registered	<input type="checkbox"/>		
Members since	<input type="text"/>	<input type="text"/>	<input type="text"/>
Expiry	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Please provide a copy of your organisation's CHAS certificate.*

2.2 Health and Safety Policy

Please provide a signed copy of your Health and Safety Policy Document

To have and implement an appropriate policy, regularly reviewed, and signed off by the Managing Director or equivalent. The policy must be relevant to the nature and scale of your work and set out the responsibilities for health & safety management at all levels within the organisation.

Signed, current copy of the company policy including date of last review and who authorises publication. Guidance on writing company policies for health and safety can be found in HSE free leaflet INDG259.

Do you have an H&S Policy? Yes* No

How often is it reviewed? every months

When does it expire?

**Please provide a copy of your organisation's signed H&S Policy.*

2.3 Safety Management Structure

Please provide the details of the competent person for Health & Safety Issues within your organisation

Name:	<input type="text"/>	Address	<input type="text"/>
Position:	<input type="text"/>		
Telephone:	<input type="text"/>		
Relevant Qualification	<input type="text"/>		
Specifically relevant training	<input type="text"/>		

**Please provide a copy of your organisation's safety management structure.*

2.4 Accident record (major injuries)

Has your organisation had any major injuries or three-day report under RIDDOR 1995* in the past five years that originated from site work.

*Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995

Yes

No

If yes, please provide details of the number of major injuries and three-day report under RIDDOR for your organisation

Year ending	Total employees	Average no of site workers	Major injuries	Three day reports
2012	<i>Number</i>	<i>Number</i>	<i>Number</i>	<i>Number</i>
2011				
2010				
2009				
2008				

2.5 Accident record (fatalities)

Has your organisation had any fatality occurrence(s) in the last five years?

Yes

No

If yes, please give details including Health and Safety Executive (HSE) involvement and action taken to prevent further occurrences. Please attach additional relevant information as necessary.

2.6 Health & Safety Executive prosecution/notice

Has your organisation been prosecuted or served any notices by the Health and Safety Executive (HSE)?

Yes

No

If yes, please provide details of your H&S prosecution/notice.

Year ending	Details of prosecution/notice	Conviction/ Penalty	Steps taken as consequence
2012			
2011			
2010			
2009			
2008			

2.7 Environmental Policy

Do your organisation have an Environmental Policy in place ?

Yes*

No

**Please provide a copy of your organisation's Environmental Policy*

2.8 Environmental Law

Has your organisation, during the last three years been prosecuted for breaking any UK or EU environmental law?

Yes

No

If yes, please provide details of your prosecution. Please attach additional relevant information as necessary.

Section 3 – Workload & Experience

3.1 Company work experience

Please provide details of 5 projects in the past 36 months, relevant to your application.

Client Name	Sector*	Job type*	Procurement type*	Value*	Location*	Client Contact Name & Telephone
1						
2						
3						
4						
5						

**Please select from:*

- | | | | | |
|-----------|-----------|-------------|------------|----------------|
| Hotel | Refurb | D&B | <£10k | North West |
| Education | Fit Out | Traditional | £10-£50k | North East |
| Housing | New Build | Other | £50-£200k | Midlands |
| Leisure | | | £200-£500k | South West |
| Other | | | £500-£1m | South East |
| | | | >1m | Greater London |
| | | | | Wales |
| | | | | Scotland |
| | | | | N.Ireland |
| | | | | Rep of Ireland |
| | | | | Europe |
| | | | | Worldwide |

3.3 Supply Chain experience

Give a brief description of your organisation’s supply chain procedure/process and how you would add value to our supply chain. Please attach additional relevant information as necessary.

Section 4 – Economic & Financials

4.1 Annual turnover

Please indicate the annual turnover for your company over the last three (3) years. In addition, we also require confirmation of what percentage of that turnover is in respect of building refurbishment, new build, fit out or other work.

Financial year					Annual turnover (£)			% relating to			
								Refurb-ishment	New build	Fit out	Other
MM	YY	-	MM	YY	000	000	000				
MM	YY	-	MM	YY	000	000	000				
MM	YY	-	MM	YY	000	000	000				

4.2 Insurance

Please provide details on insurance held and supply copies of certificates

Insurance type	Insurer Name	Policy No	Cover (£)	Expiry date		
Employers liability				DD	MM	YY
Public liability				DD	MM	YY
Contractor all risk				DD	MM	YY
Professional indemnity				DD	MM	YY
Product liability				DD	MM	YY

**Please provide copies of insurance types, as indicated above.*

4.3 Constructionline

Is your company registered with constructionline ?
(<http://www.constructionline.co.uk/>)

YES NO
 Not applicable

If yes, please provide:

Membership number

Members since DD MM YYYY

Expiry DD MM YYYY

**Please provide your constructonline certificate.*

Section 5 – Quality Assurance

5.1 Quality Management System

Is your organisation ISO 9001 (Quality Management Standard) compliant? YES* NO

Do your organisation have a management system in place? YES^ NO

**Please provide your ISO 9001 certificate and documentation*

^Please provide your organisation's QMS documentation

If the above documents cannot be provided, please indicate how you maintain and monitor quality on site. Please attach additional relevant information as necessary.

Please indicate the person responsible for quality management in your organisation

Person responsible	<input type="text"/>	Contact No	<input type="text"/>
Position	<input type="text"/>		
Qualification	<input type="text"/>		

5.2 Environmental Management System

Is your organisation ISO 14001 (Environmental Management System) compliant? YES* NO

Do your organisation have an environmental management system in place? YES^ NO

**Please provide your ISO 14001 certificate and documentation*

^Please provide your organisation's EMS documentation

If the above documents cannot be provided, please indicate how you minimise any adverse effects on the environment, eg waste management, reducing energy consumption, etc.

Please indicate the person responsible for environmental management in your organisation

Person responsible	<input type="text"/>	Contact No	<input type="text"/>
Position	<input type="text"/>		
Qualification	<input type="text"/>		

5.3 Waste management

Do your organisation have a waste management policy/ procedure in place? YES^ NO

^Please provide your organisation's waste management documentation

If the above documents cannot be provided, please indicate how you manage construction waste.

Please indicate the person responsible for waste management in your organisation

Person responsible		Contact No	
Position			
Qualification			

Is your organisation a member WRAP Halving Waste to Landfill ? YES NO

5.4 Sustainable procurement

Do your organisation have a sustainable procurement policy or procedure in place? YES^ NO

^Please provide your organisation's sustainable procurement documentation

If the above documents cannot be provided, please indicate how you optimise sustainability practices.

Please indicate the person responsible for sustainable procurement in your organisation

Person responsible		Contact No	
Position			
Qualification			

BREEAM

Have do you have experience with:

BREEAM 2008	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
BREEAM 2011	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

If yes, in the past 24 months, how many of your projects have achieved BREEAM:

	<i>Outstanding</i>	<i>Excellent</i>	<i>Very good</i>	<i>Good</i>	<i>Pass</i>
BREEAM 2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
BREEAM 2011	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you have in-house BREEAM Accredited professional(s)? YES NO

If yes, how many?

5.5 Corporate Responsibility

Do your organisation have a Corporate Responsibility policy in place? YES^ NO

^Please provide your organisation's CR policy

If the above documents cannot be provided, please indicate how engage Corporate Responsibility.

Please indicate the person responsible for waste management in your organisation

Person responsible	<input type="text"/>	Contact No	<input type="text"/>
Position	<input type="text"/>		
Qualification	<input type="text"/>		

Do your company undertake community investment programmes? YES NO

If yes, how many programmes were undertaken in the past 24 months?

Considerate Constructors Scheme (CCS)

Do you have experience working on projects under the CCS scheme? YES NO

Section 6 – Equal Opportunities

6.1 Equality and Diversity

Do your company have an Equality and Diversity Policy in place and in action? YES^ NO

^Please provide your organisation's E&D policy

If the above documents cannot be provided, please indicate how engage in promoting equality and diversity in your company?

Please indicate the person responsible for equality and diversity in your organisation

Person responsible	<input type="text"/>	Contact No	<input type="text"/>
Position	<input type="text"/>		
Qualification	<input type="text"/>		

6.2 Investor in People

Is your organisation 'Investor in People' certified ? YES^ NO

^Please provide your Investor in People certificate

If the above document(s) cannot be provided, please indicate how you engage employee personal progression and improvement?

Please indicate the person responsible for employee personal progression and improvement in your organisation

Person responsible	<input type="text"/>	Contact No	<input type="text"/>
Position	<input type="text"/>		
Qualification	<input type="text"/>		

6.3 Convictions

Has your company been the subject of a formal investigation by the Commission for Racial Equality (CRE) on grounds of alleged unlawful discrimination?

YES^ NO

If yes, please provide details of your conviction(s).

Thank you for completing our pre-qualification questionnaire. Please ensure all sections of the form are completed to avoid any delay in processing your application.

Please return this form and all supporting documents to:
Pre-Construction Division (PQQ),
Create Construction Ltd,
1 Neptune Court, Hallam Way
Blackpool FY4 5LZ

t: +44 (0) 1253 608999

f: +44 (0) 1253 763536

e: julie.blinston@createconstruction.co.uk

We will respond to your application in approximately 10 working days.
Shall there be any queries, please do not hesitate to contact us.

Thank you.