

COMPANY DETAILS

Trading Name:

Company Address:

Company Telephone Number

Company Email

Name of Contact

Position:

Nature of business:

Elements of Interest:

Number of Direct Employees:

Average Indirect Employees

REFERENCES

Please provide brief details (nature of works, value and Client) of two previous contracts:

1.

2.

I confirm that it is acceptable for the details provided within this questionnaire to be passed on to other prospective tenderes for the Old Livestock Market development

Y N

Please return to:

Sir Robert McAlpine
Old Market Inn
Newmarket Street
Hereford HR4 9HR

OLD LIVESTOCK MARKET



Expression of Interest Questionnaire

STANHOPE

Sir Robert McALPINE

COMMERCIAL

What is your annual company turnover:

Maximum value of work undertaken:

Details of your Insurance Cover:

- Employers Liability
Max Value: _____
- Public Liability
Max Value: _____
- Contractors All Risks
Max Value: _____
- Professional Indemnity
Max Value: _____

HEALTH AND SAFETY

Do you have a Company H&S Policy? **Y** **N**

Name of Director responsible for H&S

Do you have a Company H&S advisor? **Y** **N**

Name of H&S Advisor:

Qualifications:

Do you operate a Company H&S Management System?

Y **N**

Typical H&S qualifications held by supervisors:

- CSCS
- SMSTS
- SSTS
- NEBOSH Construction Certificate

Other:

SUSTAINABILITY

Do you have an Environmental Policy Statement?

Y **N**

Do you have ISO 14000:1 Accreditation?

Y **N**

QUALITY

Do you have a Quality System / Procedures?

Y **N**

Do you have ISO 9001:1 Accreditation?

Y **N**

