

# SUB-CONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE ORGANISATION DETAILS (PART 1 OF 5)



|                    |       |
|--------------------|-------|
| Form Completed By: |       |
| Signed:            | Date: |

## **ORGANISATION INFORMATION**

|  |  |  |   |
|--|--|--|---|
| Organisation Name  |  | Branch<br>(If Applicable)                |   |
| Organisation Address                                       |  | Telephone Number                         |   |
|  | Post Code:                               | Facsimile Number                         |   |
| Company Registration Number                                |  | Size of Work Force                       |   |
| Web Address  |  |  |   |
| Legal Entity   | <input type="checkbox"/> Individual      | <input type="checkbox"/> Limited Company | <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Partnership |
| Minimum Project Value                                      | £  | Maximum Project Value                    | £   |
| Operating Regions<br>(Please select all regions you offer) | <input type="checkbox"/> Avon            | <input type="checkbox"/> Gloucestershire | <input type="checkbox"/> Oxfordshire  |
|  | <input type="checkbox"/> Bedfordshire    | <input type="checkbox"/> Greater London  | <input type="checkbox"/> Surrey   |
|  | <input type="checkbox"/> Berkshire       | <input type="checkbox"/> Hampshire       | <input type="checkbox"/> West Sussex  |
|  | <input type="checkbox"/> Buckinghamshire | <input type="checkbox"/> Hertfordshire   | <input type="checkbox"/> Wiltshire  |

|   |  |
|---|--|
| Does the Organisation have any accreditations e.g. ISO 9001 \ ISO 14001 |  |
|---|--|

|                          |  |                          |  |
|--------------------------|--|--------------------------|--|
| Estimating Contact Name  |  | Contact Telephone Number |  |
| Contact e-mail           |  |                          |  |
| Contracting Contact Name |  | Contact Telephone Number |  |
| Contact e-mail           |  |                          |  |

## **ORGANISATION SERVICES**

On the following page please indicate the main services that your organisation can offer by ticking the boxes:

|   |  |  |
|---|--|--|
| <b>A Preliminaries</b>                                    | <input type="checkbox"/> Waterproof Rendering              | <input type="checkbox"/> Specialist Equipment              |
| <input type="checkbox"/> Agency Labour                    | <input type="checkbox"/> Waterproofing                     | <input type="checkbox"/> Theatre Seating                   |
| <input type="checkbox"/> Builders Clean                   | <b>K Linings/Sheathing/Dry Partitioning</b>                | <input type="checkbox"/> White Goods                       |
| <input type="checkbox"/> Permanent Services               | <input type="checkbox"/> Cubicles                          | <b>P Building Fabric Sundries</b>                          |
| <input type="checkbox"/> Scaffolding                      | <input type="checkbox"/> Demountable Partitions            | <input type="checkbox"/> Blown Insulation                  |
| <input type="checkbox"/> Temporary Services               | <input type="checkbox"/> Drylining                         | <input type="checkbox"/> Cutting & Drilling                |
| <input type="checkbox"/> Testing                          | <input type="checkbox"/> Metsec Framing                    | <input type="checkbox"/> Insulation                        |
| <b>B Complete Building/Structures/Units</b>               | <input type="checkbox"/> Partitions                        | <input type="checkbox"/> Ironmongery                       |
| <input type="checkbox"/> Bathroom Pods                    | <input type="checkbox"/> Raised Access Floors              | <input type="checkbox"/> Mastic Sealants                   |
| <input type="checkbox"/> Volumetric Construction          | <input type="checkbox"/> Suspended Ceilings                | <b>Q Paving/Planting/Fencing/Site Furniture</b>            |
| <b>C Demolition/Alteration/Renovation</b>                 | <input type="checkbox"/> Timber Flooring                   | <input type="checkbox"/> Artificial Grass                  |
| <input type="checkbox"/> Asbestos Removal                 | <input type="checkbox"/> Washroom System                   | <input type="checkbox"/> Block Paving                      |
| <input type="checkbox"/> Chimney Sweeps                   | <b>L Windows/Doors/Stairs</b>                              | <input type="checkbox"/> Court Markings                    |
| <input type="checkbox"/> Demolition & Stripping Out       | <input type="checkbox"/> Aluminium Windows & doors         | <input type="checkbox"/> Cycle Shelters                    |
| <input type="checkbox"/> Shoring                          | <input type="checkbox"/> Balustrades                       | <input type="checkbox"/> Fencing & Gates                   |
| <input type="checkbox"/> Shotblast Cleaning               | <input type="checkbox"/> Canopies                          | <input type="checkbox"/> Green Roofing                     |
| <input type="checkbox"/> Structural Repairs               | <input type="checkbox"/> Conservatory                      | <input type="checkbox"/> Landscaping                       |
| <input type="checkbox"/> Timber Treatment & Damp Proofing | <input type="checkbox"/> Folding Partitions                | <input type="checkbox"/> Resin Bonded Gravel               |
| <b>D Groundworks</b>                                      | <input type="checkbox"/> Garage Doors                      | <input type="checkbox"/> Road Markings                     |
| <input type="checkbox"/> Dewatering                       | <input type="checkbox"/> Glazing                           | <input type="checkbox"/> Sports & Play Surfaces            |
| <input type="checkbox"/> Groundworks                      | <input type="checkbox"/> Industrial & Roller Shutter Doors | <input type="checkbox"/> Streetworks                       |
| <input type="checkbox"/> Piling                           | <input type="checkbox"/> Louvres & Brise Soleil            | <input type="checkbox"/> Tarmacadam Surfacing              |
| <input type="checkbox"/> Retaining Walls                  | <input type="checkbox"/> Metal Stairs                      | <input type="checkbox"/> Tree Surgery                      |
| <input type="checkbox"/> Sheet Piling                     | <input type="checkbox"/> Revolving Doors                   | <input type="checkbox"/> Vehicle Barriers                  |
| <input type="checkbox"/> Underpinning                     | <input type="checkbox"/> Roller Shutters                   | <b>R Disposal Systems</b>                                  |
| <input type="checkbox"/> Vibro Compaction                 | <input type="checkbox"/> Rooflights                        | <input type="checkbox"/> Aluminium Rainwater Goods         |
| <b>E Insitu Concrete/Large PCC</b>                        | <input type="checkbox"/> Secondary Glazing                 | <input type="checkbox"/> Cast Iron Rainwater Goods         |
| <input type="checkbox"/> Formwork, Concrete, Steel Fixing | <input type="checkbox"/> Security Grilles                  | <input type="checkbox"/> Drain Surveys, Cleaning & Repairs |
| <input type="checkbox"/> Precast Concrete Frame           | <input type="checkbox"/> Sliding Doors                     | <input type="checkbox"/> Harvesting Tanks                  |
| <input type="checkbox"/> Precast Floors & Stairs          | <input type="checkbox"/> Steel Windows & Doors             | <input type="checkbox"/> Pumping Stations                  |
| <input type="checkbox"/> Precast Foundations              | <input type="checkbox"/> Sunpipes                          | <input type="checkbox"/> Sewerage Treatment Tanks          |
| <input type="checkbox"/> Precast Panel Cladding           | <input type="checkbox"/> Timber Stairs                     | <input type="checkbox"/> Syphonic Roof Drainage            |
| <b>F Masonry</b>  | <input type="checkbox"/> Timber Windows & Doors            | <input type="checkbox"/> UPVC Rainwater Goods              |
| <input type="checkbox"/> Brick Cleaning                   | <input type="checkbox"/> UPVC Windows & Doors              | <b>S Piped Supply Systems</b>                              |
| <input type="checkbox"/> Brickwork                        | <input type="checkbox"/> Walkways                          | <input type="checkbox"/> Fire Suppression Systems          |
| <input type="checkbox"/> Fireplaces & Chimneys            | <input type="checkbox"/> Window Films / Manifestations     | <input type="checkbox"/> Swimming Pools                    |
| <input type="checkbox"/> Glass Block Walling              | <input type="checkbox"/> Window Repairs                    | <b>T Mech Htg/Cooling/Refrigeration Systems</b>            |
| <input type="checkbox"/> Repointing                       | <b>M Surface Finishes</b>                                  | <input type="checkbox"/> Mechanical & Plumbing Services    |
| <input type="checkbox"/> Stonework                        | <input type="checkbox"/> Acoustic Flooring                 | <input type="checkbox"/> Renewable Energy                  |
| <b>G Structural/Carcassing/Metal Timber</b>               | <input type="checkbox"/> Artex & Coving                    | <input type="checkbox"/> Solar Panels                      |
| <input type="checkbox"/> Carpentry                        | <input type="checkbox"/> Ceramic Tiling                    | <input type="checkbox"/> Underfloor Heating                |
| <input type="checkbox"/> Engineered Timber & Gluams       | <input type="checkbox"/> Coloured Render                   | <b>U Ventilation/Air Conditioning Systems</b>              |
| <input type="checkbox"/> Metal Decking                    | <input type="checkbox"/> Cornice Works                     | <input type="checkbox"/> Air Conditioning                  |
| <input type="checkbox"/> Roof Trusses                     | <input type="checkbox"/> Fire Protection                   | <input type="checkbox"/> Passive Ventilation               |
| <input type="checkbox"/> Structural Steelwork             | <input type="checkbox"/> Hygienic Cladding                 | <b>V Electrical Supply/Power/Lighting Sys</b>              |
| <input type="checkbox"/> Timber Frame                     | <input type="checkbox"/> Insulated Render                  | <input type="checkbox"/> Electrical Services               |
| <input type="checkbox"/> UPVC Fascias & Soffits           | <input type="checkbox"/> Marble & Terrazzo                 | <b>W Communications/Security/Control Sys</b>               |
| <b>H Cladding / Covering</b>                              | <input type="checkbox"/> Painting & Decorating             | <input type="checkbox"/> Access Control                    |
| <input type="checkbox"/> Composite Roof Panels            | <input type="checkbox"/> Plastering & Rendering            | <input type="checkbox"/> CCTV Systems                      |
| <input type="checkbox"/> Copings & Fascias                | <input type="checkbox"/> Polished Flooring                 | <input type="checkbox"/> Data & Communication              |
| <input type="checkbox"/> Curtain Walling                  | <input type="checkbox"/> Polished Plaster                  | <input type="checkbox"/> Fire Alarms                       |
| <input type="checkbox"/> Leadwork                         | <input type="checkbox"/> Resin Flooring                    | <input type="checkbox"/> Intruder Alarms                   |
| <input type="checkbox"/> Metal Roofing                    | <input type="checkbox"/> Screeding                         | <input type="checkbox"/> Lightning Protection              |
| <input type="checkbox"/> Patent Glazing                   | <input type="checkbox"/> Soft Flooring                     | <b>X Transport Systems</b>                                 |
| <input type="checkbox"/> Rainscreen Cladding              | <b>N Furniture/Equipment</b>                               | <input type="checkbox"/> Cranes                            |
| <input type="checkbox"/> Rigid Sheet Roofing & Cladding   | <input type="checkbox"/> Blinds                            | <input type="checkbox"/> Escalators                        |
| <input type="checkbox"/> Slate Roofing                    | <input type="checkbox"/> Curtains & Soft Furnishings       | <input type="checkbox"/> Hoists                            |
| <input type="checkbox"/> Structural Glazing               | <input type="checkbox"/> Fall Arrest Systems               | <input type="checkbox"/> Lifting Beams                     |
| <input type="checkbox"/> Tile Roofing                     | <input type="checkbox"/> Fitted Furniture                  | <input type="checkbox"/> Passenger Lift                    |
| <input type="checkbox"/> Weatherboarding                  | <input type="checkbox"/> Kitchens                          | <input type="checkbox"/> Platform Lift                     |
| <b>J Waterproofing</b>                                    | <input type="checkbox"/> Mirrors                           | <b>Z Purpose Made Joinery &amp; Metalwork</b>              |
| <input type="checkbox"/> Asphalt Roofing                  | <input type="checkbox"/> Sanitaryware                      | <input type="checkbox"/> Joinery                           |
| <input type="checkbox"/> Felt Roofing                     | <input type="checkbox"/> Shelving                          | <input type="checkbox"/> Metalwork                         |
| <input type="checkbox"/> Single Ply Roofing               | <input type="checkbox"/> Signage                           |  |

# SUB-CONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE

## HEALTH & SAFETY DETAILS (PART 2 OF 5)



### A. HEALTH AND SAFETY AT WORK – SELECTION AND CONTROL OF WORKS CONTRACTORS

|   |                               |                             |
|---|-------------------------------|-----------------------------|
| Are you registered with CHAS or a similar SSIP (Safety Schemes in Procurement) recognised Health and Safety assessment scheme?                              | <input type="checkbox"/> Yes* | <input type="checkbox"/> No |
| <b>*IF YES, PLEASE PROVIDE A COPY OF THE CERTIFICATION OF ACCREDITATION AND GO DIRECTLY TO SECTION B<br/>(THE REMAINDER OF SECTION A MAY BE LEFT BLANK)</b> |                               |                             |

This form must be completed by prospective sub-contractors and returned fully completed.  
 The Health and Safety at Work etc Act 1974 puts responsibility on the Main Contractor to ensure that persons engaged by them perform their duties in construction activities safely and without risk to others.  
 To appraise the safety standards of your organisation the following must be completed:

|  |                               |                                 |
|--|-------------------------------|---------------------------------|
| Does the organisation have a Health & Safety Policy<br><b>*(IF YES PLEASE PROVIDE A COPY)</b>                                      | <input type="checkbox"/> Yes* | <input type="checkbox"/> No     |
| Who is the person responsible for Health & Safety within the organisation?   |                               |                                 |
| Who are the professional safety office / consultant for the company?   | Name                          |                                 |
|  | Address                       |                                 |
|  | Details of Qualifications     |                                 |
| Who is responsible for monitoring the Health & Safety within the organisation?   |                               |                                 |
| Have you a safety manual within the organisation outlining the rules and working procedures?                                       | <input type="checkbox"/> Yes  | <input type="checkbox"/> No     |
| What Health & Safety Training do you provide?  |                               |                                 |
|  | Course                        | Organisation Providing Training |
| A For Management/Supervisors   |                               |                                 |
|  |                               |                                 |
|  |                               |                                 |
|  |                               |                                 |
| B Operatives   |                               |                                 |
|  |                               |                                 |
|  |                               |                                 |
|  |                               |                                 |
| Please give details of the organisation's safety record for the past 3 years:  |                               |                                 |
| Please give details of reportable accidents to the Health & Safety Executive within the last 3 years:                              |                               |                                 |
| Who is responsible for investigating accidents?  |                               |                                 |
| Do you carry out noise assessments?<br><b>*(PLEASE ATTACH EXAMPLE)</b>   | <input type="checkbox"/> Yes* | <input type="checkbox"/> No     |
| Do you provide COSHH assessment and instruct operatives in safe use of products<br><b>*(ATTACH AN EXAMPLE OF COSHH ASSESSMENT)</b> | <input type="checkbox"/> Yes* | <input type="checkbox"/> No     |

|   |                               |                             |
|---|-------------------------------|-----------------------------|
| Give details of any Health & Safety surveillance carried out by the organisation:         |                               |                             |
| Do you provide personal protective clothing/ equipment to employees                       | <input type="checkbox"/> Yes  | <input type="checkbox"/> No |
| If Yes, have you records of clothing/ equipment which are available on request?           | <input type="checkbox"/> Yes  | <input type="checkbox"/> No |
| What is your safety helmet policy?  |                               |                             |
| Is the plant equipment owned or hired?  |                               |                             |
| How do you ensure that plant and equipment is kept in good condition and PAT tested?      |                               |                             |
| Do you produce a risk assessment for each project?<br>*(IF YES PLEASE PROVIDE AN EXAMPLE) | <input type="checkbox"/> Yes* | <input type="checkbox"/> No |
| Do you produce method statements for each project?<br>*(IF YES PLEASE PROVIDE AN EXAMPLE) | <input type="checkbox"/> Yes* | <input type="checkbox"/> No |
| Do you wish to provide further details, if relevant:                                      |                               |                             |

## **B. QUALITY MANAGEMENT PROCEDURES**

To comply with our Quality Management and Procedures, it is necessary for you to complete the questions below:

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Has your organisation been certified to the Quality Management standard ISO9001:2015 by a UKAS accredited certification body                                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If Yes, please identify the certification body  |                              |                             |
| Does your organisation have a quality system but not certified  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does your organisation not have a quality system but consider that you can provide the service and materials to comply with our requirements and specifications | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

## **C. ENVIRONMENTAL MANAGEMENT PROCEDURES**

To comply with our Environmental Management and Procedures, it is necessary for you to complete the questions below:

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Has your organisation been certified to the Environmental Management standard ISO14001 by a UKAS accredited certification body   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If Yes, please identify the certification body   |                              |                             |
| Does your organisation have an Environmental system but not certified  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does your organisation not have an environmental system but consider that you can provide the service and materials to comply with our requirements and specifications | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**D. MODERN SLAVERY & HUMAN TRAFFICKING PROCEDURES**

\*Only applicable to companies with a turnover > £36m.

To comply with our Modern Slavery and Human Trafficking policy and procedures, it is necessary for you to complete the questions below:

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Does the organisation have a Modern Slavery and Human Trafficking statement/policy?<br><b>(IF YES PLEASE PROVIDE A COPY)</b>                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Who is responsible for ensuring the policy is implemented?  |                              |                             |
| Are any parts of the business identified as at risk of slavery or human trafficking taking place?<br><b>(IF YES PLEASE IDENTIFY MITIGATION STEPS)</b> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

# SUB-CONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE INSURANCE DETAILS (PART 3 OF 5)



|                              |  |
|------------------------------|--|
| NAME OF INSURED ORGANISATION |  |
|------------------------------|--|

**DETAILS OF ANY ENDORSEMENTS OR EXCLUSIONS MUST BE PROVIDED.  
INCLUDING A COPY OF THE INSURANCE SCHEDULE**

## **EMPLOYERS LIABILITY**

|                           |               |  |
|---------------------------|---------------|--|
| Insurer's Name            | Policy Number | Expiry Date  |
| Limit of Indemnity        | £             | Indemnity to Principal Included <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Exclusions or Limitations |               |  |

## **PUBLIC LIABILITY**

|  |               |  |
|--|---------------|--|
| Insurer's Name   | Policy Number | Expiry Date  |
| Limit of indemnity, any one accident or series of accidents arising from one event | £             | Indemnity to Principal Included <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Amount of excesses   | £             |  |
| Exclusions or Limitations<br>(standard or 'as per policy' is not acceptable)       |               |  |

## **CONTRACTOR'S ALL RISKS**

|  |               |   |
|--|---------------|---|
| Insurer's Name   | Policy Number | Expiry Date   |
| Indemnity, any one accident or series of accidents arising from one event    |               |   |
| Sum Insured  | £             | Principles included as joint insured <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Amount of Excesses   | £             |   |
| Exclusions or Limitations<br>(standard or 'as per policy' is not acceptable) |               |   |

|                          |                              |
|--------------------------|------------------------------|
| Brokers Name and Address | Broker's/Insurer's Signature |
|                          | Date:                        |

NOTE: Sub-contractors must maintain adequate insurance cover. The following would be considered minimum levels, subject to their compliance with any stated minimum requirements of the main contract. Public Liability - £2M. Public Liability must include an 'Indemnity to Principals' clause. Employer's Liability - as required by law. Sub-Contract Works – to be covered by the sub-contractors to the full value of the sub-contract subject to the specific clauses in the sub-contract.

# SUB-CONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE FINANCIAL DETAILS (PART 4 OF 5)



## FELTHAM CONSTRUCTION OFFICE USE ONLY

ACCOUNT NUMBER

## ORGANISATION INFORMATION

|                             |  |  |  |
|-----------------------------|--|--|--|
| Unique Tax Reference (UTR)  |  |  |  |
| Company Registration Number |  |  |  |
| National Insurance Number   |  | NI Contact Name<br>(if LLP or Sole Trader) |  |
| VAT Registered Number       |  |  |  |

Feltham Construction Ltd is subject to HMRC Domestic Reverse Charge VAT.

If you think the Reverse Charge does not apply to you then please evidence this claim using HMRC literature for review by FCL.

We can be contacted at [subcontract@felthamconstruction.co.uk](mailto:subcontract@felthamconstruction.co.uk).

## CONTACT INFORMATION

|                            |  |
|----------------------------|--|
| Accounts Dept Contact Name |  |
| Telephone Number           |  |
| Facsimile Number           |  |
| E-mail Address             |  |

## PAYMENT INFORMATION

|                |            |  |   |  |  |   |  |  |
|----------------|------------|--|---|--|--|---|--|--|
| Bank Name      |            |  |   |  |  |   |  |  |
| Bank Address   |            |  |   |  |  |   |  |  |
|                | Post Code: |  |   |  |  |   |  |  |
| Account Name   |            |  |   |  |  |   |  |  |
| Account Number |            |  |   |  |  |   |  |  |
| Sort Code      |            |  | - |  |  | - |  |  |

# SUB-CONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE SELF BILLING AGREEMENT (PART 5 OF 5)



| DETAILS NEEDED   | DETAILS SUPPLIED                          |
|--|---|
| Customer Name  | Feltham Construction Ltd                  |
| Sub-Contractor Name  |   |
| Customer VAT Number  | GB 438 1469 36                            |
| Sub-Contractor VAT Number  |   |
| The self-biller (the customer) agrees to issue self-billed invoices for all supplies made to them by the self-billee (the sub-contractor) for the following period 01/11/22 - 31/10/24:    | 31 / 10 / 2024                            |
| The self-biller agrees to complete self-billed invoices showing the supplier's name, address and VAT registration number, as well as all the other details that make up a full VAT invoice | Tick to indicate agreement ✓              |
| The self-biller agrees to make a new self-billing agreement in the event that their VAT registration number changes  | Tick to indicate agreement ✓              |
| The self-biller agrees to inform the supplier if the issue of self-billed invoices will be outsourced to a third party   | Tick to indicate agreement ✓              |
| The self-billee (the sub-contractor) agrees to accept invoices raised by the self-biller on my behalf until the following date:  | 31 / 10 / 2024                            |
| The self-billee agrees not to raise sales invoices for the transactions covered by this agreement  | Tick to indicate agreement ✓              |
| The self-billee agrees to notify the customer immediately if they change their VAT registration number, stop being VAT registered or sell their business (or part of their business)       | Tick to indicate agreement ✓              |
| Customer's Signature   | Signed by:                                |
| Customer's Business or Organisation (if applicable)  | Signed on behalf of: Feltham Construction |
| Date:  | 01 / 11 / 2022                            |
| Sub-Contractor's Signature   | Signed by:                                |
| Sub-Contractor's Business or Organisation (if applicable)  | Signed on behalf of:                      |
| Date:  | ... / ... / ...                           |



### **GENERAL DATA PROTECTION REGULATION (GDPR)**

In line with GDPR we are informing you of what data we collect and how we store/handle it in order to be compliant.

We may collect and use personal information for the performance of a contract to which you are party. We have a duty to ensure that your data is secure and confidential at all times and we will only collect data that is required by us to perform the contract into which we have entered with you. We do not sell any information to third parties.

We will retain the information provided to us for a minimum of 7 years, unless there is a specific contractual or legislative reason to hold the data for longer. Information beyond that time, once no longer required, will be disposed of securely. For further detail please visit our website [www.felthamgroupltd.co.uk](http://www.felthamgroupltd.co.uk).