



Electrical Contractors

SUBCONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE

Please return completed forms and any attachments to: ICS Electrical Contractors, Unit 2 Copse Paddock, Hollows Park, Leicester, Leicestershire LE9 9JJ or via email to: info@ics-electrical.co.uk

Company Name:			
Registered Company Number:		Business Type: <i>(Ltd, Sole Trader etc.)</i>	
Company Address:			
Telephone:		Email Address:	

Insurance			
Insurance Type:	Amount of Cover:	Expiry Date:	Copy Attached?
Employers Liability			<input type="checkbox"/>
Public Liability			<input type="checkbox"/>
Professional Indemnity			<input type="checkbox"/>

Health & Safety / Environmental			
Do you have a Health & Safety policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Copy of Health & Safety policy enclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have an Environmental policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Copy of Environmental policy enclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have an Equality & Diversity policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Employees:	
Are your employees DBS checked?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide Health & Safety performance statistics for the last five years in the table below:	
Number of Accidents:	Fatal:		
	Major:		



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	Minor:	
Are you a member of SSIP or any other Health & Safety schemes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide details...
Do you have membership of Trade Associations or Organisations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide names and certificates...
What area/(s) does your company service?		

Trade References		
Please provide at least two trade references with contact details:	Reference 1:	Reference 2:

Signature:		Date:	
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ICS Office Use Only:			
Comments:		Approved:	<input type="checkbox"/> Yes <input type="checkbox"/> No