

Short Bros Developments Ltd & Churchill Property Management Services

Contractor Capture Questionnaire

The purpose of this document is to help you demonstrate your company's competence. We will use this form as part of our assessment of your company. Please enter your answers in the response boxes and list any documents you are enclosing. You can use extra sheets if needed.

SECTION 1 - GENERAL	
Company Name:	Bank Account Name:
Company Address:	Bank Address:
Main Contact Name:	Sort Code:
Main Contact Telephone Number:	Account Number:
Main Contact Email:	VAT No:

SECTION 3 - BUSINESS ACTIVITIES
Business Description as noted on your liability insurance schedule:
Activities to be undertaken for Short Bros Developments Ltd/Churchill Property Management Services:
Are these activities as noted above covered by this policy?

SECTION 4 - INSURANCES	
EMPLOYERS LIABILITY INSURANCE	PUBLIC & PRODUCTS LIABILITY INSURANCE
Insurers Name:	Insurers Name:
Policy Number:	Policy Number:
Expiry Date:	Expiry Date:
Indemnity Limit:	Indemnity Limit:
Policy Excess:	Policy Excess:
Please provide details of any exclusions/limitations:	Please provide details of any exclusions/limitations (including use of hot works):
Does the policy cover the following aspects?	Does the policy cover the following aspects?
a) Indemnity of Principals? YES/NO b) Liabilities to Labour Only Sub-Contractors? YES/NO c) Working at Height? YES/NO d) Other, please specify.	a) Indemnity of Principals? YES/NO b) Liabilities to Labour Only Sub-Contractors? YES/NO c) Working at Height? YES/NO d) Damage to property on which your are working? YES/NO e) Damage to property temporarily in your care? YES/NO f) Products liability extension? YES/NO

SECTION 5 - TRADE REFERENCES	
How long have you been trading?	Number of employees?
Please provide details of two Trade References:	
Name:	Name:
Address:	Address:
Telephone Number:	Telephone Number:
Email:	Email:

SECTION 6 -SUSTAINABILITY
<p>Has your organization been convicted or received a notice served upon if for infringement of environmental legislation in the last three years? If your answer is 'yes' please give details of the conviction or notice and details of any remedial actions you have made to prevent circumstances recurring.</p>

SECTION 7 - HEALTH & SAFETY AND ACCREDITATIONS	
If you employ the services of H&S Consultants, please provide their details (name/address/telephone number/email):	
If you do not employ the services of H&S Consultants, please provide details on how your H&S is managed:	
Please provide details of the following such as Proof of competencies or trade body memberships (e.g., NICEIC)	

SECTION 8 - SIGNATURES	
I can confirm that the following information supplied in this application is accurate and true to the best of my knowledge:	
Name:	Signature:
Position:	Date:

SECTION 9 - RETURNING YOUR FORM	
If you have any queries about this form, please contact us.	
Please return your completed form along with any supporting documentation:	By Email: david@shortbros.com
	By Post: PO BOX 6009, CARDIFF CF15 9YJ