



**worcestershire**  
**countycouncil**

**Sustainable Transport  
Framework Qualification Document**

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## GUIDANCE NOTES

All questions must be answered fully.

The information disclosed in this form will be used in the selection of contractors for admission to the framework. However, acceptance for this approved list does not imply any representation by the Council as to your financial stability, technical competence or ability in any way to carry out the service. The right to use this information as part of the formal tender evaluation process is hereby reserved to the Council.

- Please note that whenever used in this questionnaire, the term 'firm' refers to a sole practitioner, partnership, incorporated company, co-operative, charity or analogous entities operating outside the UK as appropriate, and the term 'officer' refers to any director, company secretary, partner, associate, trustee or other person occupying a position of authority or responsibility within the firm.
- Unless instructed otherwise when answering the questions, please give details that specifically relate to your firm, not to the whole of the group if your firm forms part of a group.
- Please include, where appropriate, any supporting documents, marking clearly on all enclosures the name of your firm and the number of the question to which they refer. Where the space given for any answer is insufficient please continue your answer on a separate page, again clearly marking your firm's name and the question number to which it relates.
- All information submitted will be treated in the strictest confidence.
- Each question should be answered individually. It is not sufficient to cross reference to enclosed documents.
- Please return the questionnaire to Sustainable Transport, address given on the last page of this form, together with any supporting documents. We will acknowledge receipt by email.

**THE DEADLINE FOR SUBMISSION OF THIS FORM IS NO LATER THAN 16.00 ON 19<sup>TH</sup> APRIL 2010. FORMS RECEIVED AFTER THIS DATE WILL NOT BE PROCESSED.**

**Worcestershire County Council  
Sustainable Transport and Transport Services**

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**PART 1**

**GENERAL INFORMATION**

**Details of applicant**

1. Name and address of your firm.


2. Registered Office Address, if different to question 1


3. Local Office Address, if different to question 1

Tel : _____ Fax: _____

4. Address for Correspondence, if different to question 1

Tel : _____ Fax: _____

e-mail address

5. Name, and job title, of the person we should contact about the operation of Worcestershire County Council contracts


Telephone number

e-mail address

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6. Telephone Hotline number to enable passengers, parents, guardians or carers to contact you should any unexpected delays or difficulties occur

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7. Nature of your firm, (e.g. sole principal, partnership, private limited company, public limited company, social enterprise, charity or other please specify)


8. Please provide a list of the full names of all directors and Company Secretary of the firm or Partners; if a Partnership

(please continue on a separate sheet if necessary)


9. Have any of those named in question 8 been bankrupt or involved in any firm that has been liquidated or gone into receivership?  
(If so, please give details)


10. Have any of those named in 8 above or a close relative been employed or are employed by the Council at a senior level or are or have been an Elected Member of the Authority?

YES	
NO	

Tick as appropriate

11. If the answer to 10 is YES please provide full details

ENCLOSED	
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Tick if enclosed

## Registration Details

All applicants should complete the appropriate sections. Firms not currently registered in the UK should answer the following questions, substituting where relevant the appropriate professional, commercial or other register applicable within their domestic jurisdiction.

### Companies

12. **Please state the firm's date of registration and registration number under the Companies Act 1985**


13. Date of registration and registration number under Industrial and Provident Societies Act 1965 to 1978 (if applicable)


14. If the firm is a member of a group of companies, give the names and addresses of the ultimate holding company and associated companies. State the relationship clearly.


15. Will the group or ultimate holding company be prepared to guarantee, as a subsidiary, your contract performance?

YES	
NO	

Tick as appropriate

## PART 2

### FINANCIAL INFORMATION

1. What is the name and position of the person in the firm responsible for financial matters?

Telephone number

e-mail address


2. Should we request them, can you supply copies of your firm's accounts for the last three year's trading?

YES	
NO	

Tick as appropriate

### Taxation

3. VAT registration number


## Insurance

4. Please give details of insurance and enclose photocopies of certificates as indicated below. Note where Owner Drivers are used please complete Drivers form and attach copies of all documents as indicated on the form.

(a) Employers Liability Insurance held

Insurer	
Policy Number	
Limit of Indemnity	
Expiry Date	

(b) Public Liability (Third Party) Insurance – minimum £2 million

Insurer	
Policy Number	
Limit of Indemnity	
Expiry Date	

(c) Vehicle Insurance

Insurer		
Policy Number		
Expiry Date		
Copy of certificate enclosed?	Tick if enclosed	

5. Have you ever sought and been declined insurance cover?

YES	
NO	

Tick as appropriate

6. If the answer to 5 is YES please provide full details

ENCLOSED	
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Tick if enclosed

**PART 3**

**HEALTH AND SAFETY**

**All firms, whether operating or not in the UK, should attempt to answer each of the following questions, substituting where relevant the appropriate legislation/codes of practice etc which are applicable within their domestic jurisdiction.**

**Health and Safety Officer**

1. Give the named person or organisation from whom competent Health and Safety advice or assistance is obtained


2. Give details of the relevant training, expertise and knowledge and any other qualities which would enable the person/organisation named in 1 to properly assist in Health and Safety advice/assistance

ENCLOSED	
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Tick if enclosed

**Health and Safety Policy**

3. Does your firm have a current Health and Safety Policy and arrangements, or other declaration or information/instruction, issued by your firm as necessary, to protect health and safety and prevent risks at work?

YES	
NO	

Tick as appropriate

4. Do you have systems in place to effectively convey details, of how your health and safety policies are administrated and managed, to your staff?

YES	
NO	

Tick as appropriate

5. Do you formally monitor your firm's activities to ensure compliance with its safety policies and procedures?

YES	
NO	

Tick as appropriate

If the answer to 3, 4 & 5 is YES please provide full details:

ENCLOSED	
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Tick if enclosed

## Contraventions

6. Has your firm during the last three years been prosecuted for contravention of the Health and Safety at Work Etc Act 1974, Construction (Design and Management) Regulations 1994 or equivalent national legislation?

YES	
NO	

Tick as appropriate

7. If the answer to 6 is YES please provide full details

ENCLOSED	
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Tick if enclosed

8. Has your firm during the last three years been the subject of a formal investigation by the Health and Safety Executive or similar national body charged with improving Health and Safety standards?

YES	
NO	

Tick as appropriate

9. If answer to question 8 is YES please provide full details.

ENCLOSED	
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Tick if enclosed

**PART 4**

**EQUAL OPPORTUNITIES**

**As an employer and service provider Worcestershire County Council takes a proactive approach to its obligations arising from Equal Opportunities legislation. Among them are:**

- Maternity Rights 1987 (amended 1999)
- Equal Pay Act 1970
- Race Relations Act 1976 (amended 2000)
- Sex Discrimination Act 1975
- Disability Discrimination Act 1995

Worcestershire County Council therefore considers it essential that all organisations wishing to provide services on behalf of the Council are able to demonstrate that all reasonably practicable steps are taken to allow equal access and equal treatment in employment and service delivery to all.

1. Do you have an Equal Opportunities Policy?

Yes  No

2. Is it your policy as an employer to comply with your statutory obligations under the current legislation relating to Equal Opportunities and accordingly, your practice not to treat one group less favourably than others because of their colour, race, nationality, ethnic origin, gender, sexual orientation or disability in relation to decisions to recruit, train or promote employees?

Yes  No

3. In the last 3 years has any court or tribunal found a case of unlawful discrimination against your Company?

**Enforcement action may not disbar your Company from inclusion in the framework, but failure to disclose it could.**

Yes  No

If yes, please provide details and the action taken, to prevent a re-occurrence, in the space below.

4. In the last 3 years has your Company been the subject of a formal investigation by the Commission for Racial Equality, the Disability Rights Commission or the Equal Opportunities Commission on grounds of alleged unlawful discrimination?

12

**Investigation will not disbar your Company from inclusion in the framework, but failure to disclose it could.**

Yes  No

If yes, please provide details and the action taken to prevent a re-occurrence on a separate sheet.

5. Does your Company observe, as far as possible, the Commission for Racial Equality's Code of Practice for Employment as approved by Parliament in 1983 ?

Yes  No

6. Is your policy on Equal Opportunities set out: -

a. In instructions to those concerned with recruitment, training or promotion of employees?

Yes  No

b. In documents available to employees, recognised Trades Unions or other employee representative groups?

Yes  No

c. In recruitment advertisements or other literature?

Yes  No

**PART 5**

**ENVIRONMENT**

1. Does your firm have an environmental or 'green' policy?

Yes  No

2. If yes, is that system accredited?

3. If the answer to question 1 is No, do you have any plans to put in place an environmental strategy to reduce your adverse impact on the environment?

Yes  No

4. If yes, when do you anticipate the policy will be in place?

Please give projected date

5. Has your firm been prosecuted or been issued with an improvement notice by any enforcement body responsible for protecting the environment in respect of any part of it's day to day operation?

Yes  No

6. If the answer to question 5 is YES, please provide brief details in the space below.

**PART 6**  
**QUALITY**

**Quality Certification**

1. Has your firm obtained certification under BS EN ISO9000 or some other similar quality assurance system?

YES	
NO	

Tick as appropriate

2. If the answer to 1 was yes, can you provide certificates and the relevant supporting information should we ask to see it?

YES	
NO	

Tick as appropriate

3. If the answer to question 1 is NO, give brief details of how you monitor the quality of services provided?

ENCLOSED	
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Tick if enclosed

If you are working towards implementation of another recognised quality system please include details of it.

**Complaints**

4. Give full details of your firm's complaint handling procedures

ENCLOSED	
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Tick if enclosed

**PART 7**  
**TRAINING**

**Training Policy**

1. Does your firm have a documented training Policy?

YES	
NO	

Tick as appropriate

2. If the answer to 1 is NO please provide details of how the firm manages the training of its employees.

ENCLOSED	
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Tick if enclosed

3. Is the firm a member of, or working towards, membership of an appropriate industry or sector training scheme?

YES	
NO	

Tick as appropriate

4. Do you have a Training Officer?

YES	
NO	

Tick as appropriate

5. If the answer to question 4 is YES please give name and relevant qualifications of the Training Officer.

ENCLOSED	
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Tick if enclosed

## Investors in People

6. Are you an externally accredited 'Investor in People'? If only part of the organisation is accredited please indicate the percentage covered.

YES	
NO	

Tick as appropriate

7. If the answer to 6 was yes can you, if required, supply the appropriate certification and documentation?

YES	
NO	

Tick as appropriate

8. If the answer to question 6 is NO are you, or will you, be actively working towards the implementation of such a Programme?

YES	
NO	

Tick as appropriate

9. If the answer to question 8 is YES, please give the target date for completion.

DATE	
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**PART 8**

**TECHNICAL CAPABILITIES  
AND REFERENCES**

**Contract Performance**

1. Within the last three years has your firm had any contract terminated, or withdrawn, for reasons of poor or non-performance?

YES	
NO	

Tick as appropriate

2. If the answer to question 1 above is YES, please enclose details.

ENCLOSED	
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Tick if enclosed

3. If you have not previously held a Worcestershire County Council contract, have you, within the last 2 years, had any contracts to provide passenger transport services to another Local Authority?

YES	
NO	

Tick as appropriate

4. If the answer to question 3 is YES, please give a brief summary of previous work done.

ENCLOSED	
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Tick if enclosed

**Operational details**

5. Does your firm take up formal references for all new staff?

YES	
NO	

Tick as appropriate

**6 Criminal Records Bureau.**

It is a condition for all contracts operated on behalf of Worcestershire County Council that drivers must have an enhanced CRB check. All drivers operating journeys on WCC contracts must have received a satisfactory CRB check through the County Council and their names must be notified to the County Council prior to the Service Start Date of the contract. The cost of these checks is the responsibility of the contractor.

Current Worcestershire County Council policy is to check the contractor's drivers at an enhanced level and clearance will be given to a maximum of three years before the next check is required.

YES	
NO	

Please indicate your agreement to comply with Worcestershire County Council CRB policy.

Tick as appropriate

7 The address of the operating Centre (where your vehicles are usually kept), if different to your correspondence address, that will operate WCC contracts if awarded.


8. Give either:  
 The address of the Traffic Area Office(s) that issued your Operator’s licence(s), licence number & number of vehicles covered  
 Or for Hackney carriage/private hire, the name of the licensing authority that issued your licence .


9. Hackney Carriage/Private hire operators: Please give details of Badge number , number of vehicles (if appropriate) and expiry date issued to your firm .


10 Has your firm ever been the subject of a Traffic Commissioner’s disciplinary hearing or ever had Disciplinary Conditions imposed upon its Operator’s Licence?

YES	
NO	

Tick as appropriate

11. If the answer to 10 is YES, please provide brief details.

ENCLOSED	
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Tick if enclosed

12 Using the attached forms please provide a comprehensive list of ALL vehicles to be considered for use on WCC contracts whether owned by you or your owner/drivers.

ENCLOSED	
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Tick if enclosed

13 Drivers – please complete the form entitled Drivers with details of all drivers who currently are or are to be considered for driving on Council contracts whether employed by your self-employed owner/drivers.

ENCLOSED	
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Tick if enclosed

**WHEN YOU HAVE COMPLETED THE QUESTIONNAIRE  
PLEASE READ AND SIGN THE SECTION BELOW**

I/We certify that the information supplied is accurate to the best of my/our knowledge and that I/We accept the conditions and undertakings requested in the questionnaire. I/We understand that false information could result in my/our exclusion from the Tender list.

I/We agree to abide by the rules of the framework and the Contract terms and conditions

Signed \_\_\_\_\_

Print Name \_\_\_\_\_

For and on behalf of \_\_\_\_\_

Date: \_\_\_\_\_

Telephone Number \_\_\_\_\_

Email address \_\_\_\_\_

Please note, the term 'firm' refers to: sole practitioner, partnership, incorporated company, as appropriate. The undertaking should be signed by the applicant, a partner or authorised representative in her/his own name and on behalf of the firm.

Before returning this application form, please ensure that you have:

- Answered all questions appropriate to your application
- Enclosed all relevant documents
- Completed the fleet lists and drivers list and enclosed copies of all their documents
- Signed and dated` the above undertaking

If you have any queries regarding the completion of this form please contact:

Janet James  
Worcestershire County Council  
Sustainable Transport  
Pavilion E1  
County Hall  
Spetchley Road  
Worcester  
WR5 2NP

Tel: 01905 728892

Email: [TransportTendering@worcestershire.gov.uk](mailto:TransportTendering@worcestershire.gov.uk)