

**CONTRACTORS QUESTIONNAIRE**

## Once complete please return this form (ideally in PDF format) to:

## info@stylebuildingltd.co.uk

In order that we may consider your firm for inclusion on our list of Approved Contractors, please complete this form and provide the necessary documents requested.

|  |  |
| --- | --- |
| Company Trading Name: |  |
| Registered Address: |  |
| Contact Telephone Numbers: |  |
| Fax Number: |  |
| Main e-mail address: |  |
| Main contact person: |  |
| Website: |  |

|  |  |
| --- | --- |
| Number of employees: |  |
| Number of years in Business: |  |
| Approximate annual turnover: |  |
| VAT Registration number: |  |

|  |  |
| --- | --- |
| Person responsible for Health and Safety (or external consultant) and their contact details: |  |
| No. of reportable incidents within the last 5 years (If any please attach info to back of form) |  |

Please attach the following information and return with this document to:

1. A Certified copy of proof of Public Liability Insurance Policy.
2. If appropriate, a certified copy of Professional Indemnity Insurance.
3. Certificate of membership / qualification you have detailed on this form.
4. Health and Safety Policy (if the company has 5 or more employees)

Please confirm which trades you are able to cover, which relevant trade associations you are a member of and what relevant certification your company or operatives hold.

Please forward copies of all documentation.

Trade

Please Tick

Association or Accreditation

Certification attached

Document attached

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Asbestos Removal |  |  |  |  |
| Aerials |  |  |  |  |
| Asphalting / Paving |  |  |  |  |
| Carpentry |  |  |  |  |
| Carpet Fitting |  |  |  |  |
| Cleaning |  |  |  |  |
| Heating Maintenance & Installation |  |  |  |  |
| Electrical Work |  |  |  |  |
| Fencing |  |  |  |  |
| Gardening / Arboriculture Work |  |  |  |  |
| Gas Fitting |  |  |  |  |
| General Building Work |  |  |  |  |
| Glazing |  |  |  |  |
| Lift Maintenance & Installation |  |  |  |  |
| Locksmith |  |  |  |  |
| Painting & Decorating |  |  |  |  |
| Pest Control |  |  |  |  |
| Plastering |  |  |  |  |
| Plumbing |  |  |  |  |
| Roofing |  |  |  |  |
| Rope Access Work |  |  |  |  |
| Scaffolding |  |  |  |  |
| Security - Door Entry Systems, Alarms, CCTV |  |  |  |  |
| Water Hygiene |  |  |  |  |
| Window Replacement |  |  |  |  |

Please Confirm Your Hourly Charge Rates for the Following Trades.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Trade** | **Callout Charge** | **Hourly Rate Thereafter** | **Out of Hours Callout Charge** | **Hourly Rate Thereafter** |
| Carpentry |  |  |  |  |
| Carpet Fitting |  |  |  |  |
| Cleaning |  |  |  |  |
| Heating Maintenance /Installation |  |  |  |  |
| Electrical Work |  |  |  |  |
| Gardening / Arboriculture Work |  |  |  |  |
| Gas Fitting |  |  |  |  |
| General Building Work |  |  |  |  |
| Glazing |  |  |  |  |
| Locksmith |  |  |  |  |
| Painting and Decorating. |  |  |  |  |
| Plastering |  |  |  |  |
| Plumbing |  |  |  |  |
| Rope Access Work. |  |  |  |  |
| Security - Door Entry Systems,Alarms, CCTV |  |  |  |  |

Please confirm which of the following areas you are currently able to efficiently cover.

If there are any areas that you only partially cover please let us know in the space below.

**South-East England**

|  |  |
| --- | --- |
| Brighton |  |
| Bromley |  |
| Croydon |  |
| Dartford |  |
| Enfield |  |
| Guildford |  |
| Harrow |  |
| Ilford |  |
| Kingston Upon Thames |  |

|  |  |
| --- | --- |
| Redhill |  |
| Romford |  |
| Reading |  |
| Romford |  |
| Slough |  |
| Sutton |  |
| Tonbridge |  |
| Twickenham |  |
| Uxbridge |  |
| **All** |  |

|  |  |
| --- | --- |
| London E |  |
| London EC |  |
| London N |  |
| London NW |  |
| London W |  |
| London WC |  |
| Medway |  |
| Oxford |  |
| Reading |  |

## Wider area definition:-

## Payments

All of our payments are paid via BACS transfer with an electronic remittance by email.

We do not send payments by cheque. We endeavour to settle invoice payments within a 28 day period.

Please provide the names and addresses of two of your regular customers who we have your permission to contact to confirm the standard of your work and your reliability.

## Reference 1

Name: Organisation: Address:

 Post Code:

Tel: Email:

## Reference 2

Name: Organisation: Address:

 Post Code:

Tel: Email:

# Health and Safety:

In circumstances where you are instructed to effect works, you are to ensure that:

1. That a risk assessment and method statement is provided for all jobs and submitted along with your signed work order.
2. Only persons with the necessary skills and knowledge appropriate for the relevant works are allowed to work unsupervised.
3. All site personnel are provided with the necessary information, instruction, training and adequate resources (including time) to enable safe working practices.
4. All site personnel are provided with the correct PPE (Personal Protective Equipment) and that staff are trained to use it correctly to protect the user against health and safety risks at work.
5. All measures necessary to ensure that persons work safely are implemented.
6. There is appropriate supervision generally and that any apprentices, persons undergoing training or others without the requisite experience are closely managed.
7. All insurances are in place.
8. Any works which are or become notifiable under The Construction Design & Management Regulations are advised to us. All works carried out MUST be carried out in accordance with the CDM regulations.

Further, you agree to instruct your all persons on site:

1. To contact us for information about any known asbestos on the property; and that all materials are presumed to contain asbestos, where there is no evidence to the contrary.
2. On the procedures to be followed if asbestos is discovered, disturbed or damaged.
3. If you are a member of the UKCG (UK Contractors Group) please ensure that all workers carry their CSCS cards whilst on site.

All contractors must make themselves aware of the above mentioned regulations, legislations and policies, The above mentioned rules and regulations are by no means an exhaustive list, contractors must regularly update their (and their staff's) knowledge of latest regulations and safety procedures and forward any new certifications or accreditations.

I certify that all the information I have provided is true and that I agree and accept all of the terms contained within this document. I have attached details of any incidents where HSE (Health & Safety Executive) legal proceedings or any other legal proceedings howsoever arising have been issued against my business in the last five years.

I understand that signing this document does not guarantee I will be instructed to carry out any work.

Date:



Signed - Director/Sole Proprietor/Partner Print Name of Signatory above

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# The minimum requirements that must be attached to this form are:

1. A Certified copy of proof of Public Liability Insurance Policy.
2. If appropriate, a certified copy of Professional Indemnity Insurance.
3. Certificate of membership / qualification you have detailed on this form.
4. Health and Safety Policy (if your company has 5 or more employees).

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