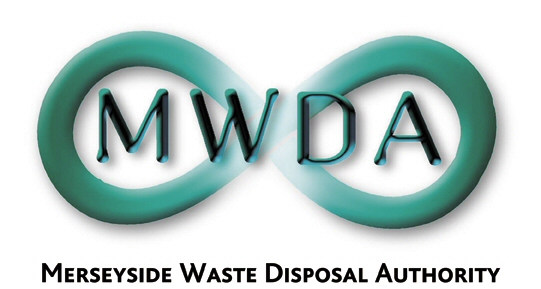
**Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**



**Capital Accounting Valuations 2022 to 2024 (WMRC and Closed LAndfill Sites)**

**CONTRACTOR INFORMATION PACK**

**To be completed by all Tenderers and returned with Tender Submission**

**December 2021**

**Merseyside Waste Disposal Authority**

**7th Floor**

**No. 1 Mann Island**

**Liverpool**

**L3 1BP**

1. **INTRODUCTION** 
   1. This Contractor Information Pack is for use by Tenderers (“Tenderers”) who are submitting Tenders for Capital Accounting Valuations 2022 – 2024 (WMRC and Closed Landfill Sites)
   2. This document sets out the information which is required by Merseyside Waste Disposal Authority (MWDA) in order to assess the suitability of Tenderers in terms of their technical knowledge and experience, capability, capacity, organisational and financial standing to meet MWDA’s requirements.
   3. No information contained in this document, or in any communication made between MWDA and any Applicant in connection with this document shall be relied upon as constituting a contract, agreement or representation that any contract shall be offered in accordance with this Information Pack. MWDA reserves the right, subject to the appropriate procurement regulations, to change without notice the basis of or the procedures for the tendering process, or to terminate the process at any time. Under no circumstances shall MWDA incur any liability in respect of this Information Pack, supporting information or the tender documents.
   4. In assessing the answers to the following questions, MWDA will be seeking evidence of the Applicant’s suitability to undertake the Capital Accounting Valuations 2022 – 2024 (WMRC and Closed Landfill Sites) in terms of economic and financial standing, technical and professional ability.
   5. MWDA will not reimburse any costs incurred by Applicants in connection with preparation and submission of their responses to this Information Pack or the Tender response.
   6. The contents of this Information Pack and that of any other documentation sent or provided by you in respect of this tender process are provided on the basis that they remain the property of MWDA and must be treated as confidential.
   7. If any Applicant is unable or unwilling to comply with this requirement you are required to destroy this Information Pack and all associated documents immediately and not to retain any electronic or paper copies.
   8. No Applicant shall undertake any publicity activities with any part of the media in relation to the procurement process without the prior written agreement of MWDA, including agreement on the format and content of any publicity.
   9. This tender is made available in good faith. No warranty is given as to the accuracy or completeness of the information contained in it and any liability for any inaccuracy or incompleteness is therefore expressly disclaimed by MWDA and its advisers.
   10. MWDA reserves the right to reject tenders which are not submitted in accordance with the instructions given.
   11. MWDA reserves the right to change without notice the procedure for appointing contractors to the contract, to reject any or all bids for the contract, and to stop the process and not appoint a contractor at any time without any liability on its part. Nothing in this process is intended to form any express or implied contractual relationship between the parties unless and until a contract is entered into. MWDA is not liable for any costs resulting from cancellation of this process or any costs incurred by Applicants taking part in this tender process.
   12. Where there is any indication that a conflict of interest exists or may arise then it shall be the responsibility of the Applicant to inform MWDA detailing the conflict in writing as an attachment to the Information Pack. MWDA will be a final arbiter on cases of potential conflicts of interest. Failure to notify MWDA if any potential conflict of interest will invalidate any verbal or written agreement.
   13. Applicants are deemed to understand fully the processes that MWDA is required to follow under relevant European and UK legislation.
2. INSTRUCTIONS FOR COMPLETING THIS INFORMATION PACK
   1. In this Information Pack:-

* **‘Organisation’** within the Information Pack includes any legal entity established inside or outside the UK and should be interpreted accordingly.
* **‘Officer’** includes a director, company secretary, partner, associate and any other person occupying a similar position of authority or responsibility within the organisation.
* ‘**Registration’** means inclusion on the register maintained by the Registrar of Companies, or on a similar commercial or professional register of another state.
  1. Unless otherwise indicated, give details that relate to the organisation that will perform the services rather than to any group to which your organisation belongs. **Please note that if you wish your financial and economic standing to be assessed on the strength of a parent or ultimate holding company, a parent company/holding guarantee will be required.**
  2. This Information pack has 8 sections (A to H), plus one appendix. All questions **must** be answered; insert ‘NOT APPLICABLE’ clearly in the appropriate place against any questions that do not apply to your organisation, together with an explanation of why the questions are not applicable.
  3. Section G asks for information on consortium arrangements and sub-contracting. Applicants who are responding as a consortium (including any form of partnership, prime contractor relationship or joint venture company) or propose to use sub-contractors or subsidiary companies to take on major elements of the services, must complete Section G to provide details on the consortium arrangements and must complete the other sections and appendix 1 as if from the consortium as a combined entity. Applicants who intend to self-provide 90% or more of the services only need to provide details of the subcontractors at section G. **Any consortium arrangement must have a single contractor that takes overall responsibility for the services whether delivered by itself or by other members of the consortium or subcontractors.**
  4. Please be concise in your answers, and where the question requires a narrative response, limit the length of the response to a maximum of 1000 words per question.
  5. Where the space provided is insufficient for your answer, continue on a separate sheet, clearly marking that sheet with the name of your organisation and the number of the question to which it relates.
  6. Remember to enclose all supporting documents requested and mark each with the name of your organisation and the number of the question to which it relates.
  7. This form must be completed in the English language. Documents not in the English language must be accompanied by an English translation and a certificate by a bona fide independent translator attesting the authenticity of the translation.
  8. MWDA reserves the right to contact organisations’ technical referees and may wish to visit reference sites, referees should be alerted in advance so as not to cause delay.
  9. MWDA may wish to contact organisations’ financial referees and this Information Pack includes a form which Applicants are required to complete to authorise financial referees to provide information to MWDA Where monetary values are given in other than Pounds Sterling, the Exchange Rate for the currency as used by MWDA’s Banker at noon on the first day of the month in which the Information Pack is due to be returned (or next working day if that day is a bank holiday) will be applied to enable necessary calculations/comparisons to be made.
  10. Any Information Pack partially completed may not be considered.
  11. In assessing the financial standing of each Applicant, its response to the Tender will be reviewed, along with the Applicant’s submitted annual reports and accounts for the three most recent years, and any interim accounts and press releases submitted. Information may also be obtained from a credit rating agency to highlight any issues that are not brought to the attention of MWDA by the Applicant’s responses to the Tender and any supporting documents. A further assessment of financial standing prior to contract award may also be undertaken
  12. Please ensure that you complete the Undertaking at Appendix 1 of this document before returning the form and any enclosures.
  13. Applicants should note that MWDA reserves the right to terminate any ensuing contract with the Applicant at any time if it is discovered that the Applicant has made any false statement or material misrepresentation in this or any subsequent document.
  14. Applicants should note that the information given at this stage might be subject to verification later in the selection process. If any error, omission, false statement or misrepresentation is discovered, MWDA reserves the right to disqualify the applicant from selection, without regard to what stage the selection process has reached when the error, omission, false statement or misrepresentation is discovered.

1. **ENQUIRES/ REQUEST FOR CLARIFICATION**
   1. Any enquiries regarding this form should be made in writing or by e-mail to Tony Byers or Graeme Bell at the address or e-mail address specified below. Please note that any clarification given will be in writing or e-mail and may be circulated to all persons expressing an interest. The Applicants should not make any contact with any other employee or member of MWDA, MWDA’s advisers or any authority or statutory body in relation to this project without MWDA’s prior agreement.

Merseyside Waste Disposal Authority

7th Floor

No. 1 Mann Island

Liverpool

Merseyside L3 1BP

United Kingdom

[Procurement@merseysidewda.gov.uk](mailto:Procurement@merseysidewda.gov.uk)

1. Freedom of Information and Environmental Information Statement
   1. MWDA is subject to The Freedom of Information Act 2000 (“Act”) and The Environmental Information Regulations 2004 (“EIR”).
   2. As part of the MWDA’s duties under the Act or EIR, it may be required to disclose information concerning the procurement process or the Framework Agreement to anyone who makes a request.
   3. If the Applicant considers that any of the information provided in their information pack is commercially sensitive (meaning it could reasonably cause prejudice to the Applicant if disclosed to a third party) then it should be clearly marked as "Not for disclosure to third parties” together with valid reasons in support of the information as being exempt from disclosure under the Act or EIR.
   4. MWDA will endeavour to consult with the Applicant and have regard to comments and any objections before it releases any information to a third party under the Act or EIR. However, the MWDA shall be entitled to determine in its absolute discretion whether any information is exempt from the Act or EIR or is to be disclosed in response to a request of information. The MWDA must make its decision on disclosure in accordance with the provisions of the Act or EIR and can only withhold information if it is covered by an exemption from disclosure under the Act or EIR.
   5. MWDA will not be held liable for any loss or prejudice caused by the disclosure of information that;

* has not been clearly marked as "Not for disclosure to third parties" with supporting reasons (referring to the relevant category of exemption under the Act or EIR where possible); or
* does not fall into a category of information that is exempt from disclosure under the Act or EIR for example, a trade secret or would be likely to prejudice the commercial interests of any person); and
* in cases where there is no absolute statutory duty to withhold information, then notwithstanding the previous clauses, in circumstances where it is in the public interest to disclose any such information.

1. **Data Protection**
   1. As part of this Contract, the Authority acknowledges that for the purposes of EU and UK Data Protection legislation (General Data Protection Regulations 2016, and the Data Protection Act 2018), that both the Contractor and the Authority are both Controllers and Processors of personal data as part of the delivery of their services and operations. As such, each party has a range of responsibilities in relation to the collection, retention and use of personal data. The Authority will retain personal data submitted by the Contractor as part of any tender submission.  This data will be retained and used as part of the delivery of any successful contract submission.  This data will be retained in line with the Authority's Corporate Privacy Notice, and the Authority's Data and Document Retention Schedule. Unsuccessful tender submissions will be retained for a shorter period of 12 months (from receipt) and will be deleted or destroyed after that date. The Authority’s Corporate Privacy Notice can be viewed at: <https://www.merseysidewda.gov.uk/wp-content/uploads/2018/11/MWDA-CORPORATE-PRIVACY-NOTICE-2018-FINAL.pdf>
   2. A copy of the Authority's Document and Data Retention Schedule can be requested by contracting the Authority's Data Protection Officer on Tel: 0151 255 1444 or by emailing [enquiries@merseysidewda.gov.uk](mailto:enquiries@merseysidewda.gov.uk)
2. **Evaluation of INFORMATION PACK**

The Applicants’ responses to this Information Pack will be evaluated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Information Pack Question** | **Sub-criteria marks available** | **Total available score** |
| **Section A: Organisation Profile** | A1 – A10 | Information Only | N/A |
| **Section B:**  **Grounds for Exclusion** | B1 – B3 | Pass/Fail | N/A |
| **Section C:**  **Insurance** | C1 | Pass/Fail | N/A |
| **Section D:**  **Financial Information** | D1 – D13 | Pass/Fail | N/A |
| **Section E:**  **Technical Resources and Experience** | E1 (Contract performance) | 20 |  |
| E2 (Capability and track record) | 10 |
| E3 (Experience) | 20 |
| E4 (Calibration and monitoring equipment) | 15 |
| E5 (Improvements) | 20 |
| E6 (Management arrangements) | 10 |
| E7 (C. Vs) | 5 |
| Total available for Section E | | 100  Weighting = 60% |
| **Section F:**  **Health and Safety, Quality, and the Environment** | F1 – F4 (Equal opportunities) | Information only |  |
| F5 – F13 (Health and safety) | 30 |  |
| F14 – F18 (Quality management) | 25 |  |
| F19 – F20 (Environmental management and sustainability) | 25 |  |
| F21-F23 (Customer care and Continuity) | 20 |  |
| Total available for Section F | | 100 Weighting 40% |
| **Section G:**  Consortium and Sub-contracting | G1 – G9 | Information only | N/A |
| **Section H:**  Undertaking | H1 | This must be satisfactorily completed | N/A |

* 1. In assessing the financial standing of each Applicant, its response to the Information Pack Section D Financial Information, ( Questions D1 – D3 and D5 – D 11) will be reviewed against the criteria set out in paragraphs 5.2 to 5.5 inclusive, along with the Applicant’s submitted annual reports and accounts for the two most recent years, and any interim accounts submitted. Information may also be obtained from a credit rating agency to highlight any issues that are not brought to the attention of MWDA by the Applicant’s responses to the Information Pack and any supporting documents. A further assessment of financial standing prior to contract award may also be undertaken.
  2. For appointment to the procurement, Applicants are required to have a minimum turnover of or equivalent to £**[*AMOUNT*]**

Where an Applicant does not meet the relevant minimum turnover threshold, the Authority shall reserve the right to include the applicant in the procurement where:

* the Applicant can provide a parent company guarantee as per the Applicant’s Information Pack response a group or ultimate holding company which is able to satisfy the turnover threshold. The quality of any support letters required will be assessed as part of this preliminary assessment;
* where a parent company guarantee is provided, it may be appropriate to review financial information presented from the applicants’ parent or guarantor company, dependent on the organisational and legal structure of the Applicant’s as outlined in the Information Pack response; or
* Where an Applicant does not have a parent company, a performance bond is provided.
  1. A banker’s reference will be sought for the applicant post submission of the Information Pack. The Authority will determine whether the reference received for each applicant is deemed satisfactory in the context of the information provided by the applicant in support of its Information Pack application. The Authority is reserves the right to exclude without further evaluation if it does not consider the reference to be acceptable.
  2. **Other Factors**

The financial assessment may include a review of information obtained from a credit rating agency.

* 1. The Information Pack will be evaluated as follows:
* Section A – Organisation Profile
* Section B – Grounds for Exclusion
* Section C – Insurance
* Section D – Financial Information
* Section G - Consortium and Sub-Contracting
* Section H – Undertaking

will be reviewed for completion and compliance on behalf of the Applicant and any consortium members. Any Applicant whose response fails this compliance check may not have their response considered further. A failure by any consortium member to comply may result in disqualification of the whole consortium.

* Sections E and F will be scored in accordance with the following methodology:

|  |  |
| --- | --- |
| **Score %** | **Explanation of reasons for award** |
| 100 | **Excellent**- The information submitted provides evidence of top quartile technical experience, ability and/or capacity to deliver a quality service |
| 70 | **More than satisfactory**-. The information submitted provides strong evidence of technical experience, ability and/or capacity to deliver a quality service |
| 50 | **Satisfactory**-. The information submitted meets MWDA’s requirements in demonstrating technical experience, ability and/or capacity to deliver a quality service |
| 30 | **Fair**- The information submitted has some minor omissions or demonstrates only limited technical experience, ability and/or capacity to deliver a quality service |
| 10 | **Poor**- The information submitted has major omissions or does not demonstrate technical experience, ability and/or capacity to deliver a quality service |
| 0 | **Very Poor**- The information is either omitted or fundamentally unacceptable to MWDA |

**SECTION A – Organisation Profile**

**A1 Full name, address, registered office and registration number of the Applicant**

|  |  |
| --- | --- |
| **Applicant Name:** |  |
| **Previous Name if applicable:** |  |
| **Registered Name if different:** |  |
| **Registered Office:** |  |
| **Country of Registration:** |  |
| **Registration Number:** |  |
| **Date of Registration:** |  |
| **VAT Number:** |  |

Please enclose a copy of the Company Certificate of Incorporation (if applicable) and any applicable certificate of incorporation on change of name or equivalent documentation

**A2 Applicant's Authorised Representative (person for contact purposes)**

|  |  |
| --- | --- |
| **Name:** |  |
| **Position:** |  |
| **Address:** |  |
| **Telephone Number:** |  |
| **Fax Number:** |  |
| **E-Mail address:** |  |

**A3 Status of Applicant**

(a) Is the applicant a single legal entity or is it a consortium or other joint venture?

*Delete as appropriate\** **Single legal entity**\* **Consortium or JV**\*

(b) If the applicant is a consortium or other joint venture, Section G must be answered as well as the other sections.

|  |  |
| --- | --- |
| **A4** Legal status or type of organisation, e.g. public/private limited company, limited liability partnership, sole trader or other |  |
|  |  |
| **A5** List the full names and addresses of Directors and Company Secretary if a company), or Partners/ Associates (if a partnership) |  |
|  |  |
| **A6 Have** any of the Directors or Partners been involved in any organisation which has been liquidated or gone into receivership, if so, please provide details. |  |
|  |  |
| **A7** If the Applicant is a member of a group of Companies or a subsidiary of another organisation, give the names and addresses of the ultimate parent or holding company and all other subsidiaries. |  |
|  |  |
| **A8** If the Applicant is a member of a group of Companies or a subsidiary of another organisation, provide a diagram showing the structure of the group. | **Please tick if enclosed** |
| **A9** If the organisation is a member of a group of Companies or a subsidiary of another organisation, please ensure you have completed D3. | **Please tick if completed** |
|  |  |
| **A10** Please provide details of any court actions and/or employment tribunal hearings related to general business practices in which the Applicant has been involved in the last three years. |  |

**SECTION B – GROUNDS FOR EXCLUSION**

Please confirm that, to the best of your knowledge, the Applicant is not in breach of the provisions of Regulation 57(1) of the Public Contracts Regulations 2015 enacting Article 45(1) of the Public Sector Directive 2004/18/EC. Applicants are requested to fully review and identify the information in the Regulations as only summaries are provided below.

**B1** Has the Applicant (or its directors or any other person who has powers of representation, decision or control of such Applicant or who has been identified as part of the Applicant’s Project team) been convicted of any of the following offences:-

|  |  |  |
| --- | --- | --- |
| **Offence** | **Tick if no conviction** | **Tick if conviction exists\*** |
| Conspiracy |  |  |
| Corruption |  |  |
| Bribery |  |  |
| Fraud including   * the offence of cheating the Revenue * the offence of conspiracy to defraud * fraud or theft within the meaning of the Theft Act 1968 and the Theft Act 1978 * fraudulent trading within the meaning of section 458 of the Companies Act 1985 * defrauding the Customs within the meaning of the Customs and Excise Management Act 1979 and the Value Added Tax Act 1994 * an offence in connection with taxation in the European Community within the meaning of section 71 of the Criminal Justice Act 1993 * destroying defacing or concealing of documents or procuring the extension of a valuable security within the meaning of section 20 of the Theft Act 1968 |  |  |
| Money laundering |  |  |
| Any other offence within the meaning of Article 45(1) of the Public Sector Directive. |  |  |
| \* If you have ticked this box please provide details and any action taken to resolve the situation. | | |

**B2** Can the Applicant (or its directors or any other person who has powers of representation, decision or control of such Applicant or who has been identified as part of the Applicant’s Project team) confirm that it is not nor has not been subject to the following events:-

|  |  |  |
| --- | --- | --- |
| **Matter** | **Tick if confirmed** | **Tick if not confirmed\*** |
| Bankruptcy |  |  |
| Winding up (other than for the purpose of bona fide reconstruction or amalgamation), receivership or administration |  |  |
| Conviction of a criminal offence relating to the conduct of its business or profession |  |  |
| Committed an act of grave misconduct in the course of his business or profession |  |  |
| Failed to fulfil its obligations relating to the payment of social security contributions |  |  |
| Failed to fulfil obligations relating to the payment of taxes |  |  |
| Guilty of serious misrepresentation in providing any information required of him under Regulation 57 of the Public Contracts Regulations 2015 enacting Article 45(1) of the Public Sector Directive 2004/18/EC previously |  |  |
| \* If you have ticked this box please provide details and any action taken to resolve the situation. | | |

**B3** Can the Applicant confirm that:

|  |  |  |
| --- | --- | --- |
| **Matter** | **Tick if confirmed** | **Tick if not confirmed\*** |
| It is licensed in the relevant State in which he is established or is a member of an organisation in that relevant State when the law of that relevant State when the law of that relevant State prohibits the provision of the services to be provided under the Framework by a person who is not so licensed or who is not such a member |  |  |
| Where applicable, it is registered with the appropriate trade or professional register(s) in the EU Member State where it is established (as set out in Annex IXC of Directive 2004/18/EC) under the conditions laid down by that Member State. |  |  |
| \* If you have ticked this box please provide details and any action taken to resolve the situation. | | |

**SECTION C – INSURANCE**

|  |  |  |
| --- | --- | --- |
| **C1** Please provide confirmation that you have or, if successful, will buy the following minimum levels of insurance: | | |
| If satisfactory confirmation cannot be given the tender will not be considered further. | YES | NO |
| **Public liability** £2,000,000 for any one incident or any one claim and the liability for fixtures, chattels and goods shall be £1,000,000 for any one incident or any one claim. |  |  |
| **Employers liability** £2,000,000 for any one incident or any one claim |  |  |
| **Environmental Impairment** £2,000,000 for any one incident or any one claim | **NOT REQUIRED** | |

**SECTION D - FINANCIAL INFORMATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **D1.** Overall Annual Turnover and Profit before Interest and Tax (PBIT) of Applicant during each of the last 2 financial years and the turnover in relation to the Capital Accounting Valuations 2022 – 2024 (WMRC and Closed Landfill Sites). (Please ensure that information supplied is for your Company *not* for the group if you are part of a group of Companies) and provide proof of the average annual turnover (excluding VAT) for the last 2 years. | | | | | | | |
| **Total Annual**  **Turnover** | Year |  | | Amount £ |  | | |
| Year |  | | Amount £ |  | | |
|  |  | |  |  | | |
| **PBIT** | Year |  | | Amount £ |  | | |
|  | Year |  | | Amount £ |  | | |
|  |  |  | |  |  | | |
| **Turnover relating to [TENDER TITLE]** | Year |  | | Amount £ |  | | |
|  | Year |  | | Amount £ |  | | |
|  |  |  | |  |  | | |
| (State if estimated for last year) | | | | | | | |
| **D2.** Name of person responsible for financial matters? | | |  | | | | |
|  | | |  | | | | |
| **D3.** If part of a group of companies, please confirm whether the group or the ultimate holding companyis prepared to guarantee the Applicant’s performance? If yes, please provide a support letter from the group or ultimate holding company. | | | YES | | | NO | |
|  | | | (Tick, as appropriate) | | | | |
|  | | |  | | | | |
| **D4** Name and address of your principal banker.  Applicants must also complete the financial reference authorisation form set out in Appendix 1. | | |  | | | | |
|  | | |  | | | | |
| **D5** Name and address of Bondsman (if any) who normally issues guarantee bonds for the Applicant. | | |  | | | | |
|  | | |  | | | | |
| **D6** Name and address of Financial Auditors including Contact Name and Tel No. | | |  | | | | |
|  | | |  | | | | |
| Please provide approval to seek references or contact Auditor to verify financial details. | | | YES | | | | NO |
|  | | |  | | | | |
| **D7.** Please provide copies of the full annual report and audited accounts of the Applicant and ultimate parent company (where the response in D3 above is YES) for the most recent three financial years, to include  - Balance Sheet  - Trading Profit and Loss Account and cost of Sales  - Full Notes to the Accounts  - Director’s Report/Auditor’s Report | | |  | | | Tick if enclosed | |

|  |  |  |
| --- | --- | --- |
| **D8.** If the most recent audited accounts are for a year ended more than 10 months ago, can you confirm that the company as described in those accounts, is still trading and there are no material changes in circumstances save as disclosed. Please also enclose a statement of Turnover and PBIT since the last set of audited accounts. | YES | NO |
|  | | |
| **D9.** If the most recent Balance Sheet is more than 10 months out of date, please include: |  |  |
|  | | |
| - a copy of the Chair’s half yearly statement, if available. |  | Tick if enclosed |
|  | | |
| **-** a statement signed by the Financial Director setting out any known significant changes in the current financial position since the last available Balance Sheet. |  | Tick if enclosed |
|  | | |

|  |  |
| --- | --- |
| **D10.** Please provide details of any outstanding claims or litigation against the Applicant. |  |

|  |  |
| --- | --- |
| **D11.** Please provide details of any contingent liability or loss (where not otherwise reported) that would require disclosure in accordance with International Accounting Standard 10. |  |

|  |  |
| --- | --- |
| **D12.** Please provide details of any financial investigation of the Applicant in the last three years by an accredited UK or EC regulator or comparable regulator. |  |

|  |  |
| --- | --- |
|  | |
| **D13.** Please provide a statement indicating whether or not the ownership of the Applicant has changed significantly over the last 12 months. Where applicable please provide details. |  |

**SECTION E - TECHNICAL RESOURCES AND EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| **E1** In terms of **any** contracts performed in the last 2 years, please provide details of the following: |  |  |
| (a) ongoing disputes (ie not just formal legal proceedings but where the client has refused to pay a material invoice or has deducted or threatened to deduct money for poor performance) | Enclosed |  |
| (b) any liquidated damages applied to contracts | Enclosed |  |
| (c) any terminations | Enclosed |  |
| (d) non-renewal for failure to perform the terms of the contract | Enclosed |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **E2** | | Please list below details of up to five contracts you have undertaken for public sector clients, similar to those which may be awarded under this contract(s), for which your organisation has in the last 2 years provided services. Please list these in order of similarity | | | | | |
| **Name and Address of Organisation responsible for the contract** | | **Name of Contract** | **Description of contract** | **Annual Value of the contract**  **£** | **Contract start date and duration of the contract in years** | **Name, telephone number and e-mail address of Contract Manager or Supervising Officer** |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |
| **Name and Address of Organisation responsible for the contract** | | **Name of Contract** | **Description of contract** | **Annual Value of the contract**  **£** | **Contract start date and duration of the contract in years** | **Name, telephone number and e-mail address of Contract Manager or Supervising Officer** |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |
| The details of the Contract Manager or Supervising Officer will be used to obtain references. | | | | | | |

|  |  |
| --- | --- |
| **E3** Please provide details of your experience in providing the equivalent to the Capital Accounting Valuations 2022 – 2024 (WMRC and Closed Landfill Sites) | **Please tick if enclosed** |
| **E4** Please provide details of any scheme, programmes or improvement processes you have implemented as part of the contracts listed at E2 above. Please include examples of the benefits made to the Employer’s operations. This should consider cost savings, system efficiency improvements and legal compliance. | **Please tick if enclosed** |
| **E5** Please provide a management chart showing the approximate number of employees in your organisation who will work on the contract; the titles and job descriptions of key personnel, and the reporting mechanisms. | **Please tick if enclosed** |

|  |  |
| --- | --- |
| **E6** Please provide CV’s for the following:  (a) ***Proposed Contract Manager***  (b) ***Proposed Surveyor*** | **Please tick if enclosed** |

**SECTION F - POLICIES AND EQUAL OPPORTUNITIES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Please answer these questions with reference to similar legislation that applies in the member state in which your organisation is registered** | | | | |
|  | |  | Tick as appropriate: | |
| **F1.** Is it your policy as an employer to comply with your statutory obligations under the Equality Act 2010 and any relevant codes of practice relating to discrimination? | |  | YES | NO |
|  | |  |  |  |
| **F2.** In the last two years, has any court or employment tribunal made a finding against your organisation of discrimination against someone because of their race, sex, sexuality or disability? | |  | YES | NO |
|  | |  |  |  |
| **F3.** In the last two years, has your organisation been the subject of formal investigation by Commission for Racial Equality (CRE), the Disabilities Rights Commission, the Equal Opportunities Commission or the Equality of Human Rights Commission or a comparable body, on the grounds of alleged unlawful discrimination in the employment field? | |  | YES | NO |
|  | |  |  |  |
|  | | | | |
| **F4.** If the answer to F2 or F3 is yes, or, in relation to question F3, the Commission made a finding against your organisation, what steps did you take as a result?  (Continue on a separate sheet and/or enclose relevant documents if appropriate). |  | | | |

|  |  |
| --- | --- |
| **F5.** Please give the name and title of the person in your organisation who has responsibility for health and safety policy |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **F6.** How are your health and safety policies and procedures conveyed to the workforce? |  | | |
|  | | | |
| **F7.** What induction and/or safety training have your employees received before they commenced their duties and in the last two years? |  | | |
|  |  | | |
| **F8.** Please enclose a copy of your Health and Safety Policy (In compliance with the Health and Safety at Work etc. Act 1974) and any other codes for safe systems of work issued to employees. |  | | |
| Safety Policy | YES | NO |
| Safe Systems | YES | NO |
|  | Delete as appropriate | | |

|  |  |  |
| --- | --- | --- |
| **F9.** Have any improvement notices, prohibition notices or prosecutions been served on your organisation by the Health and Safety Executive or any other Enforcement Authority. | YES | NO |
|  | | |
| If the answer to F12 is YES, please provide details below | | |
|  | | |

**F10.** Please provide the accident statistics for your organisation for the past 2 years.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **2019/2020** | | | **2020/2021 to date** | | |
|  | **Employees** | **Sub-Contractors** | | **Employees** | **Sub-Contractors** | |
| Number of fatal accidents (a) |  |  | |  |  | |
| Number of reportable injuries (RIDDOR 2013 (b) |  |  | |  |  | |
| Number of employees (c)  (full-time equivalents) |  |  | |  |  | |
| Incident Rate  = [(a+ b) x 1000]/c |  |  | |  |  | |
| Number of RIDDOR  Injuries to the public |  |  | |  |  | |
| Number of RIDDOR dangerous occurrences |  |  | |  |  | |
| Number of RIDDOR ill-health reports |  |  | |  |  | |
| **F11.** Who undertakes your risk assessments? | | | |  | | |
| **If risk assessments are undertaken internally, who in your company undertakes them? Please give name and title** | | | |  | | |

|  |  |  |
| --- | --- | --- |
| **If risk assessments are undertaken externally, please give the name, address and qualifications of the person undertaking them.** |  | |
| **Please provide an example of an actual Risk Assessment for a typical Company activity.** |  |  |
| ENCLOSED |

**F12.** Please describe your organisation’s procedures to ensure your sub-contractors and any other contractor with whom you are working comply with safety arrangements, risk/COSHH assessments and safe systems of work.

|  |
| --- |
|  |

**F13.** Please describe your procedures for reviewing and monitoring the organisation’s performance on health and safety matters.

|  |
| --- |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **F14.** Does your organisation offer a quality management system or a guarantee of performance? | YES | | NO |
| If your answer to F14 is YES, please enclose relevant extracts from your Quality Manual or Quality Assurance documentation to demonstrate its suitability. Include accreditation/certification details if applicable | **Please tick if enclosed** | | |
| **F15.** Please provide relevant abstracts or details describing your organisation’s systems for auditing and monitoring quality measures | **Please tick if enclosed** | | |
| **F16.** Is your organisation or any part of it quality assured or is currently pursuing certification under BS EN ISO 9001 or an equivalent standard of quality management? | | YES | NO |
| If your answer to F20, YES, please enclose details of the certification achieved or state what certification you expect to achieve and when. | | **Please tick if enclosed** | |

**F17.** Please describe any relevant industry standards/accreditations held by your company?

|  |
| --- |
|  |

**F18.** Please list any industry or customer awards received in the last 24 months and briefly describe the justification.

|  |
| --- |
|  |

|  |  |  |
| --- | --- | --- |
| **F19.** Does your organisation operate (or is pursuing accreditation to) an ISO45001 or equivalent System? | YES | NO |
| If your answer to F19, YES, please enclose details of the certification achieved or state what certification you expect to achieve and when. | **Please tick if enclosed** | |

|  |  |  |
| --- | --- | --- |
| **F20.** Does your organisation have an environmental policy or environmental management system (or is pursuing accreditation to) such as BS EN ISO 14001? | YES | NO |
| If your answer to F20, YES, please enclose details of the certification achieved or state what certification you expect to achieve and when. | **Please tick if enclosed** | |
| If NO, what environmental management measures does your organisation take? | | |
| **F21.** Does your organisation have a sustainability policy which relate to a service of this nature? | YES | NO |
| If your answer to F21, YES, please provide a copy of your Policy. | **Please tick if enclosed** | |
| **F22.** Does your organisation’s have a customer care policy | YES | NO |
| If your answer to F22, YES, please provide a copy of your Policy. | **Please tick if enclosed** | |

**F23.** What arrangements are in place to secure the continuation of your business in the event of a disaster? Please provide brief details of your disaster recovery policy, including contingencies such as insurance cover and use of alternative facilities if appropriate.

|  |
| --- |
|  |

**SECTION G - CONSORTIUM AND SUB-CONTRACTING**

|  |  |  |
| --- | --- | --- |
| **G1.** Do you intend to use sub-contractors to resource these services? | YES | NO |
| **G2.** If your answer to G1 was YES what percentage of the services do you expect to sub-contract? |  | |
| **G3.** If your answer to G2 was 10% or lower, please give details here of your proposed sub-contractors and the services they will provide?  If your answer to G2 was higher than 10%, please answer questions G4 to G9. |  | |
| **G4.** Consortium name |  | |
| **G5.** Consortium members |  | |
| **G6.** Please provide a letter from each consortium member confirming that the applicant can complete this Information Pack on behalf of the consortium | Please tick if enclosed | |
| **G7.** Please provide a diagram showing the structure of the consortium | Please tick if enclosed | |
| **G8.** Which member of the consortium is responsible for which aspect of the provision of services by the consortium? |  | |

**G9. Has the consortium or any of its members, had previous experience of bidding for or winning tenders together? Please provide details below. Please do not list a contract where the member of the consortium was not invited to negotiate and submit a priced bid:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name, address, phone and fax no of organisation** | **Client contact person** | **Contract title** | **Price basis** | **Approx. Contract Value** | **Value to date** | **Details of how this work is directly comparable** | **Date and term of contract** |
|  |  |  |  |  |  |  |  |

## SECTION H - APPLICANT’S DECLARATION

**H1.** When you have completed the Information Pack, please ensure that:

i. You have answered all the questions;

ii. You have provided all supporting documentation requested; and

iii. You have read and signed the undertaking below.

I certify that the information supplied regarding the Applicant is accurate to the best of my knowledge and that I accept the conditions and undertakings requested in the Information Pack. I understand and accept that false information could result in rejection of the application to be selected to take part in the tender process.

By signing and returning the enclosed copy of this letter, I/we confirm that I/we have not in relation to this opportunity or the Information Pack:

i. entered into any agreement with any other person with the aim of preventing bids being made or as to the fixing or adjusting of the amount of any bid or the conditions on which any bid is made or the elements or contents of any bid;

ii. informed any other person, other than MWDA, of any confidential information in relation to the contract, except where the disclosure, in confidence, was authorised by MWDA and necessary for the obtaining of competitive tenders from bidding service providers;

iii. caused or induced any person to enter into such an agreement as is mentioned in paragraphs (i) and (ii) above;

iv. committed any offence under the Bribery Act 2010;

v. offered or agreed to pay, give or accept any sum of money, inducement or valuable consideration directly or indirectly to any person for doing or having done or causing or having caused to be done in relation to any proposed bid any act or omission;

vi. offered or agreed to pay, give or accept any sum of money, inducement or valuable consideration directly or indirectly to any person bidding for this contract for services from any person in relation to this contract; or

vii. agreed to undertake work or services for any other person in connection with the contract.

I/we also undertake that I/we shall not procure the doing of any of the acts mentioned in paragraphs (i) to (vii) above before the hour and date specified for the return of the Information Pack and (if invited to tender) any resultant tenders.

I also understand that it is a criminal offence, punishable by imprisonment, to give or offer any gift or consideration whatsoever as an inducement or reward to any servant of a public body. I also understand that any such action will result in rejection of our application to take part in the tender procedure.

I understand and agree that MWDA may contact the organisations detailed in response to at Section E of this Information Pack in relation to any of the services provided for those organisations for reference purposes.

I understand and agree to the conditions set out in the Freedom of Information section in Paragraph 4 of this Information Pack.

In this letter the word "person" includes any person, body or association, corporate or incorporate and "agreement" includes any arrangement whether formal or informal and whether legally binding or not.

This undertaking is to be signed by a Partner, Director or authorised representative i.e. in their name on behalf of the Applicant.

|  |  |
| --- | --- |
| Signed for and on behalf of the Applicant: |  |
| Signed: |  |
| Name: |  |
| Position/Status in the Organisation: |  |
| Organisation’s name: |  |
| Organisation’s address: |  |
| Date: |  |

|  |  |  |
| --- | --- | --- |
| Signed |  | For and on behalf of |
|  |  |  |
| Position |  | Date |

**APPENDIX 1**

**MERSEYSIDE WASTE DISPOSAL AUTHORITY**

**Capital Accounting Valuations 2022 to 2024 (WMRC and Closed Landfill Sites)**

**To: The Chief Executive, Merseyside Waste Disposal Authority, 7th Floor, No. 1 Mann Island, Liverpool L3 1BP**

**AUTHORITY TO SEEK REFERENCES**

|  |  |
| --- | --- |
| I/We |  |
| of |  |
|  |  |

**hereby authorise you, to approach my/our Bankers and any organisation who prepares Company reports to obtain from them a reference or report as to my/our general background, technical performance and financial stability.**

**I/We understand that if such references or report are not satisfactory to you my/our expression of interest or tender will cease to be considered by MWDA.**

|  |  |
| --- | --- |
| Contact Name: |  |
| of: |  |
|  |  |
|  | **Postcode:** |
| Signed: |  |
| Position: |  |
| Company: |  |
| Date: |  |