

Date

SECTION A: COMPANY DETAILS			
Companies Legal Title			
Trading as (if applicable)			
Managing Director name			
If part of a group, who is the Ultima	ate Holding Co		
Company Registration Number			
VAT Registration Number			
UTR Number		Status:	
Main address		Tel. No.	
		Fax.No.	
What Types of Services do you provide?			
Geographical areas of operation	(please tick)	London & S.E.	
		Midlands	
		N. of England	
		S.of England	
		Wales	
		Cent.Scotland	
What is the size of your workforce	?	Office	
		On Site	
What was your turnover in the pred	ceding three years?	Year 1	£
Please enclose a copy of your latest	latest published	Year 2	£
		Year 3	£
What is the maximum contract value	ue you will undertake?		£

Section Approved: Yes / No	Signed:	Date:
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SECTION B: EHSQ (Environmental, Health & Safety, Quality)			
Do you have current approval in respect of your Health & Safety to a recognised scheme?		Yes / No	
		Reg. No.	
If YES please give registration nu	mber and date	Date	
Please Submit a copy of your cur relevant schedules of scopes of v			if the answer to this question is yes got to next section
i) Do you have a documented He Health and Safety procedures?	ealth & Safety System or formalised	Yes / No	
ii) Have you appointed a person	as Health & Safety Manager?	Yes / No	
If yes please name them	Name of Health & Safety Manager		
iii) If you have no Health & Safet to adopt formalised work procedu	y System(s) in place, are you willing res prepared by us?	Yes / No	
Do you have current approval in	respect of your Quality system to	Yes / No	
a recognised scheme?		Reg. No.	
If YES please give registration	number and date	Date	
Please Submit a copy of your cur relevant schedules of scopes of v			if the answer to this question is yes got to next section
i) Do you have a documented Quality System or formalised Quality			
procedures?		Yes / No	
ii) Have you appointed a person as Quality Manager?		Yes / No	
If yes please name them Name of Quality Manager			
iii) If you have no Quality System(s) in place, are you willing to adopt formalised work procedures prepared by us?		Yes / No	
Do you have current approval in	respect of your Environmental	Yes / No	
Management System to a recogn	ised scheme?	Reg. No.	
If YES please give registration	If YES please give registration number and date		
Please Submit a copy of your current registration certificate and relevant schedules of scopes of work			if the answer to this question is yes got to next section
i) Do you have a documented Er			
formalised environmental procedures?		Yes / No	
ii) Have you appointed a person as Environmental Manager?		Yes / No	
If yes please name them	If yes please name them Name of Environmental Manager		
iii) If you have no Environmental System(s) in place, are you willing to adopt formalised work procedures prepared by us?		Yes / No	
OFFICE USE ONLY:			
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SECTION C: BUSINESS & PROFESSIONAL STANDING			
Please complete the following for the principal contracts that you have carried out in the last 2 years			
Contract Name			
Contract / Works Value			
Main/Management Contractor			
Start Date	C	Completion Date	
Contractor's Project Manager			
Services Provided			
Contract Name			
Contract / Works Value			
Main/Management Contractor			
Start Date	C	Completion Date	
Contractor's Project Manager			
Services Provided			
Contract Name			
Contract / Works Value			
Main/Management Contractor			
Start Date	C	Completion Date	
Contractor's Project Manager			
Services Provided			
Has the company or any of its Dire	ctors/Officers been the subject of o	criminal or civil	court action
(including bankruptcy or insolvene	cy)		
		Yes / No	
Are the company or any of its Direc	ctors/Officers subject to ongoing o	r pending crim	nal or civil court
action (including bankruptcy or ins	solvency)		
		Yes / No	
Has the business (or any of its Directors/Officers been investigated, prosecuted, convicted, or been			
the subject of other enforcement action taken within the last five years for bribery or corruption?			
		Yes / No	
Has the business carried out a risk	assessment to consider whether	you are at risk o	of bribery?
		Yes / No	
Does the business meet it's statuto	Does the business meet it's statutory tax obligations in relation to PAYE/VAT/CIS?		
		Yes / No	

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SECTION D: WORKFORCE				
Please indicate what percentage of your workforce are engaged via:				
a) Payroll (PAYE)		%		
b) CIS Subcontractors		%		
c) Other		%		
If other please describe				
Has you company been the subject of court action under the Yes / No Immigration, Asylum and Nationality Act 2006 as amended 2008				
Do you make checks to verify all workers are entitled to work in the UK?		Yes / No		
Do you have a Preventing Illegal Working policy? If Yes please provide		Yes / No		
Do you have a Modern Slavery policy ? If yes please provide a copy		Yes / No		
Do payments to your workers comply with the National Minimum Wage / National Living Wage legislation?		Yes / No		
Has your business signed up to the Gangmasters & Labour Abuse Authority's Construction protocol?		Yes / No		
Does the business meet the requirements of the positive equality duties in relation to the Equalities Act 2010?		Yes / No		

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SECTION E: INSURANCE		
Employers Liability Insurance	Insurer	
	Policy No	
	Expiry Date	
	Cover Amount	
Public Liability Insurance	Insurer	
	Policy No	
	Expiry Date	
	Cover Amount	
Contractors All Risks Insurance	Insurer	
	Policy No	
	Expiry Date	
	Cover Amount	
Professional Indemnity Insurance	Insurer	
	Policy No	
	Expiry Date	
	Cover Amount	
Product Liability Insurance	Insurer	
	Policy No	
	Expiry Date	
	Cover Amount	

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SECTION F: ACCREDITATION Please provide details of any Third Party memberships for the business (or any key staff) (such as Builders Profile/CHAS/SSIP/SMAS/Achiles/Construction Line/CQMS/NEBOSH/ROSPA/CCS) Member No Expiry Member No Expiry

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