APPENDIX B

CUSTOMER ORDER FORM

**FRAMEWORK FOR** **FUNCTIONAL ELECTRICAL STIMULATORS (FES) AND ACCESSORIES FOR BIRMINGHAM COMMUNITY HEALTHCARE NHS FOUNDATION TRUST (BCHC)**

Tender Reference: BCHC-16-0010

Dated: 15 September 2016

Emma Leach - Procurement Manager

Birmingham Community Healthcare NHS Foundation Trust

Customer Order Form

***CUSTOMER INFORMATION***

|  |  |
| --- | --- |
| 1. **Organisation Name:**
 |  |
| 1. **Contact Name:**
 |  |
| 1. **Email Address:**
 |  |
| 1. **Telephone Number/s:**
 |  |
| 1. **Address for Correspondence:**
 |  |

***SUCCESSFUL SUPPLIER INFORMATION***

|  |  |
| --- | --- |
| 1. **Company Name:**
 |  |
| 1. **Contact Person**
 |  |
| 1. **Email Address:**
 |  |
| 1. **Telephone Number/s:**
 |  |

***ORDER INFORMATION***

|  |  |
| --- | --- |
| 1. **Lot/Service Description & Service ID Number:**
 |  |
| 1. **Order Date:**
 |  |
| 1. **Order Terms (0 – 36 Months):**
 |  |
| 1. **Price & Unit measure:**
 |  |
| 1. **Previous Service Spend/Budget:**
 |  |
| 1. **Forecast Spend following Award (Contract Value):**
 |  |
| 1. **Payment Term:**
 |  |
| 1. **Commencement Date:**
 |  |
| 1. **First Invoice Date:**
 |  |
| 1. **Payment Profile**
 |  |
| 1. **Specification and Tender Response**
 |  |
| 1. **Key Performance Indicators (KPI’s)**
 |  |
| 1. **Mini-Competition Documents**
 |  |
| Guidance Notes for Completion**Customer Information** |
| 1. Please enter your name your organisations name.
 |
| 1. Please enter your name.
 |
| 1. Please enter your corporate email address.
 |
| 1. Please enter your corporate contact number and mobile phone number if applicable.
2. Please enter your corporate postal address.
 |
| **Successful Supplier Information** |
| 1. Please enter the successful Suppliers name.
 |
| 1. Please enter the name of your contact point / contract manager within the supplier’s organisation.
 |
| 1. Please enter the email address for your supplier contact point.
 |
| 1. Please enter a telephone number for your contact point.
 |
| **Order Information** |
| 1. Please enter the Lot/Service Description & Service ID Number
 |
| 1. Please enter the order date
 |
| 1. Please enter the order term
 |
| 1. Please enter the Price & Unit measure
 |
| 1. Please enter the Previous Service Spend (if known)
 |
| 1. Please enter the Forecast spend following award (contract value)
 |
| 1. Please enter the payment term
 |
| 1. Please enter the commencement date of the contract
 |
| 1. Please enter the first invoice date
 |
| 1. Please attach the Payment Profile
 |
| 1. Please attach the Specification and Tender response
 |
| 1. Please attach the Key Performance Indicators (KPI’s)
 |
| 1. Please attach the Mini-Competition Documents (if applicable)
 |

**Submission: Once complete, please email a copy to the successful bidder.**