



Chris Henning
Executive Director – Place

County Hall
Matlock
Derbyshire
DE4 3AG

«New_Provider»
«NPAddress1»
«NP_Address2»
«NPPost_Town»
«NPPost_Code»

Minicom: 01629 533240
Telephone: 01629
5«Officer_Ext_Number_include_the_3_»
Ask for: «DCC_Officer_»
Our ref: «New_Contract_Number»
Your ref:

Date: 28 November 2022

Dear «New_Provider»,

AWARD OF CONTRACT TO & FROM: «Establishment»
CONTRACT NUMBER: «New Contract Number»

Further to your recent bid submission in respect of the above Tender. On behalf of Derbyshire County Council I am writing to accept your offer as detailed in your tender bid for the contract detailed above.

The terms and conditions of the Council's Contract will apply unless the Council specifies different terms and conditions in the Dynamic Purchasing System mini competition documents in which case those terms and conditions will override the Council's Contract Terms and Conditions.

1. Derbyshire County Council's tender documentation, including
 - (a) The Council's Terms and Conditions as supplied to your organisation under your acceptance as a supplier on the "Passenger Transport" Dynamic Purchasing System Place 059
 - (b) Schedule B Mini Competition Specification
 - (c) Schedule C Payment Schedule
 - (d) Schedule F This letter of acceptance
 - (e) Your tender response.

This Contract shall commence «Contract_Start_Date» and the term of this contract is «Duration».

Please sign the Acceptance of Award of Contract below and return one signed copy as soon as possible to ETEAdultcare.transport@Derbyshire.gov.uk. Signature by you will act as confirmation that the Contract has been entered into as set out in this letter:

Yours sincerely

J. V. Gregory .

«DCC_Officer_»
Senior Transport Officer, Specialised Transport

ACCEPTANCE OF CONTRACT FOR TRANSPORT TO: «Establishment»
CONTRACT NUMBER: «New Contract Number»

I/We confirm acceptance of the contract for the transport set out in this Award of Contract letter and on the terms of the original tender.

I/We confirm the Driver assigned to this contract as _____
and that he/she has a valid DBS Certificate issued through Derbyshire County Council.

*I/We confirm the Passenger Assistant assigned to this contract as _____
and that he/she has a valid DBS Certificate and PA Badge issued through Derbyshire Council.

I/We confirm that if any of the above named staff have not been issued a valid DBS Certificate and/or PA Badge by Derbyshire County Council, I/We will send original copies of all current DBS Certificates, for checking by the Authority's DBS Team, and agree to applying for the DBS Checks to be undertaken, for the above-named staff, by Derbyshire Council.

Please send me DBS Application Forms to enable me to apply for DBS Checks to be completed through Derbyshire County Council. *(Tick if you require application form(s) sending)*

Signed
Name (Block Capitals)
Position/Job Title
For and on behalf of
Date

Please return Signed copy through the electronic procurement portal.

Please return all DBS Application Forms to: Yvonne.Musk@derbyshire.gov.uk

End.