**APPENDIX H**

**Business Questionnaire – please return with quotation documents**

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| **1.** | **BASIC DETAILS OF YOUR BUSINESS** |
| 1.1 | Name of Organisation: |  |
| 1.2 | Contact name for enquiries about this Questionnaire: |  |
| 1.3 | Job Title of Contact: |  |
| 1.4 | Company Address:Post Code: |  |
| 1.5 | Telephone number: |  |
| 1.6 | Fax number: |  |
| 1.7 | E-mail address: |  |
| 1.8 | Website address: |  |
| 1.9 | Company Registration number: |  |
| 1.10 | Date of Registration: |  |
| 1.11 | Registered address, if different from the above:Post Code: |  |
| 1.12 | Are you registered for VAT?If so, please provide registration number: |  |
| 1.13 | Is your organisation: | 1. a public limited company?
 |  |
|  |  | 1. a limited company?
 |  |
|  |  | 1. a partnership
 |  |
|  |  | 1. other (please specify)
 |  |
| 2. | INSURANCE |
|  | Please confirm whether or not you have the appropriate levels of insurance cover as set out below. |
|  |  |  |  |
| 2.1 | Professional Indemnity (for the life of the contract plus 6 years) | £10 million | Yes / No |
| 2.2 | Employer’s Liability | £10 million | Yes / No |
| 2.3 | Public Liability | £10 million | Yes / No |
| 2.4 | Product Liability | £5 million | Yes / No |
| 2.5 | If you have answered ‘No’ to any of the above, please confirm you are able to obtain the required levels of insurance | Yes / No |
| **4.** | **BUSINESS ACTIVITIES & STAFFING** |

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| 4.5 | EqualitiesThe Council has an ethos to reduce its carbon footprint, proactively manage and reduce its impact on the environment and its use of natural resources and to develop its Corporate Social Responsibility. Is this an approach you agree with and are willing to support? | Yes / No |
| 4.6 | SustainabilityIs if your policy as an employer to comply with anti-discrimination legislation, and to treat all people fairly and equally so that no one group of people is treated less favourably than others? | Yes / No |