**GOSPORT BOROUGH COUNCIL**

**PROCUREMENT AND MANAGEMENT OF THE LIFT CONTRACT AND ASSOCIATED WORKS**

**APPENDIX C - REFERENCE QUESTIONNAIRE**

**You are required to submit 2 references from 2 different referees, to support the case studies provided in the Quotation Response Document.**

PLEASE RETURN YOUR RESPONSES BY: **12:00 NOON, 7 OCTOBER 2022**

You must complete Section 1 of this reference questionnaire for each referee(1 per case study), which you should then forward to your referees. They must complete Section 2 and send the completed questionnaire (with both sections) **DIRECTLY** to [procurement@gosport.gov.uk](mailto:procurement@gosport.gov.uk) .

It is then the respondents’ responsibility to check that the Council has received the required number of references in the required format before the closing date of this opportunity, please do this by e-mailing as above. This e-mail must only be used for reference issues, any other questions regarding this opportunity must be raised via the Proactis messaging facility. In urgent time limited circumstances please call 02392 545610

Please be aware that if we do not receive a returned questionnaire per case study this will invalidate your bid and it will not proceed to evaluation.

Thank you for taking the time to complete and return this questionnaire.

If you require an extension of time to complete the questionnaire please inform the Supplier seeking the reference and the Council using the email address above. The time limit will only be awarded in exceptional circumstances as decided by the Council and this MUST be agreed before the closing date above.

**SECTION 1 - OVERVIEW**

***To be completed by the supplier expressing interest in the Authority's ITQ before forwarding the questionnaire to the Client referee***

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** | **Company Name**  *supplier/contractor* |  | |
| **2.** | **Contact**  *Person completing this section of the form* | Name |  |
| Position |  |
| Email |  |
| **3.** | **Title of Project**  *expressing an interest in* |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **4.** | **Client**  *Requesting*  *a reference from* | Company name | |  |
| Name of contact | |  |
| Position in organisation | |  |
| Company address | |  |
| Email | |  |
| Telephone number | |  |
| **5.** | **Location**  *of site/works* | Site name | |  |
| Address | |  |
| City | |  |
| **6.** | **Dates**  *of contract/work* | Start date | |  |
| End date | |  |
| **7.** | **Value**  *of contract/work* | **£** | | |
| **8.** | **Description of the Project**  *Provide a general overview of the project* | |  | |

**SECTION 2 - REFERENCE QUESTIONNAIRE**

***To be completed by the Client referee and forwarded directly to the Council via the email address stated***

**Client Referee Details**

|  |  |
| --- | --- |
| **Contract/Project Name** |  |
| **Company Name** |  |
| **Name of Referee** |  |
| **Position in Company** |  |
| **Telephone Number** |  |
| **Email** |  |

|  |  |  |
| --- | --- | --- |
| **Representation of Services** | **Yes** | **No** |
| Please confirm that the description of the project, dates and values provided in the Overview (section 1, above) is an accurate representation of the services and works undertaken for your organisation in respect of the discreet package of services and works covered under the contract stated. |  |  |
| Please provide any further comments as required (expand box as needed): | | |

Please rate the service performance of the bidder in each of the areas set out in the table below. Tick (or type Y) in the relevant box for the performance areas set out below using the following criteria:

|  |  |
| --- | --- |
| **Judgement** | **Performance** |
| Excellent | The bidder exceeded the service levels expected. |
| Good | The bidder met the service levels expected to a high standard. |
| Satisfactory | Overall the bidder met the service levels expected. |
| Unsatisfactory | The bidder failed to meet expected service levels to the extent that terms of the contract / specification / offer were breached in full or in part |
| NA | Not applicable to the contract / project delivered |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Performance**  **Element** | **Excellent** | **Good** | **Satisfactory** | **Unsatisfactory** | **NA** |
| 1. Maintained agreed cost |  |  |  |  |  |
| 1. Response time within agreed target |  |  |  |  |  |
| 1. Quality of Work |  |  |  |  |  |
| 1. Management of staff/sub-contractors |  |  |  |  |  |
| 1. Interaction with Customers/residents/stakeholders |  |  |  |  |  |
| 1. Level of added value (if any) brought to the contract. |  |  |  |  |  |
| 1. Management of Contract-invoicing and any statistical returns |  |  |  |  |  |

Please provide any comments you may have regarding the performance of the contractor below (expand box as needed) that support any ratings you have provided above or that relate to any additional elements not listed above.

|  |
| --- |
|  |

Further to the performance elements tested above please provide information if any of the following issues have applied to the contract / project using the box (expand as needed) below:

* Details of any legal / financial penalties applied
* Details of any issues - with Contractor, Consultant, with Sub-Consultants / Supply Chain, 3rd party approving bodies, etc. and how these were resolved
* Details of any major variations to the contract and how these were resolved operationally and financially

|  |
| --- |
|  |

In addition to the reference questionnaire above we would be keen to understand any client learning or feedback post completion of works. Whilst this does not form an assessed part of the reference it would be appreciated if any key learning points would be shared.

This may include items such as;

* whether the final project fully met with the original client objectives
* is there any resident / end user feedback
* would you change anything if doing the project again