**Stage 1**

Contractor Evaluation Form

2023/24

Port of Tilbury

V7. TA 17/11/2023



**Contractor Evaluation Form**

|  |
| --- |
| **Section 1 - Company Information** |

**Company Name:**

**Full Address / Incl. Postcode:**

**Telephone:**

**Email(s):**

**VAT Registration Number:**

**Legal Status:**

**Please notify of up to 5 Products or Services provided by your Company:**

**1.**

**2.**

**3.**

**4.**

**5.**

|  |
| --- |
| **Section 2 – Contact Information** |

**Contact Name of Authorised Person:**

**Position in Company:**

**Telephone:**

**Email:**

|  |
| --- |
| **Section 3 - Authorisation** |

**Can you please read the statements below and confirm acceptance before proceeding to section 4.**

1. I confirm that I am an authorised person completing this form and to my knowledge all answers provided are true and correct.
2. I agree to provide copies of:
	1. Employers and Public Liability Insurance documentation, including Professional Indemnity if required.
	2. Policies and procedures relating to modern slavery, environmental and sustainability including an energy statement or roadmap highlighting how you intend to manage your energy performance. Health and Safety Policy and relevant certifications. Statement or roadmap demonstrating your intentions or pathway to managing supply chain tiering is required.
	3. ISO Accreditations, i.e. ISO9001, 14001 and other relevant certifications and licenses relevant to your industry. Including a screen shot from the HSE website as per the welcome letter.
3. I agree that in absence of my policies and procedures in point 2.2 above, I will agree to abide by the Ports Policies and Management Standards. This information will also be filtered through to those persons attending site.
4. I agree to watch and adhere to the lifesaving rules as detailed below. Please scan the QR code for details. An additional copy is provided within the welcome pack which must be shared with those persons attending site.



1. The QR code below will enable those persons on site to report a safety observation. I agree to share this with those persons on site.



**Authorised Person:**

**Position in Company:**

|  |
| --- |
| **Section 4 - Questionnaire** |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Insurance**
 | **Yes** | **No** | **Date of Expiry** |
| **A** | **Public & Product Liability Insurance to a minimum £5,000,000** |   |  |  |
| **B** | **Employers Liability Insurance to a minimum £10,000,000.00** |   |  |  |
| **C** | **Hired in Plant Insurance.**  |   |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **CIS Status & UTR Number**
 |  | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Are you currently a member of the Construction Industry Scheme?** |  |   |   |  |
|  | **If Yes Go to question B if No go to question C** |  |
| **B** | **Can you provide your Status 20% or Gross as well as your UTR Number? If yes, please provide.** |  |   |  |  |
|  | **If No**  |  |
| **C** | **If you are not registered with the Construction Industry Scheme we will deduct 30% of the element at source.** |  |   |  |  |
|  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Tax Evasion / HMRC Compliance**
 |  | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Does your organisation have a tax evasion policy?**  |  |   |   |  |
|  | **If Yes Go to question B if No go to question C** |  |
| **B** | **Please provide a copy of your tax evasion policy and any additional evidence of your commitment to HMRC processes.** **Your policy should include information noted in section C below.** |  |   |  |  |
|  | **If No**  |  |
|  |  |  |  |  |  |
| **C** | **To progress your application further you will be required to provide a policy / statement confirming the following:** (Further information as per the Criminal Finances Act 2017)* VAT returns are submitted in time and in accordance with HMRC requirements.
* Corporation tax is paid in line with UK regulations.
* You do not request payment in cash in exchange for a discount.
* You do not request split payments to UK/Non UK Bank Accounts.
* You confirm that your organisation conducts its business activities in line with current HMRC processes.
* If you hire self-employed people within your business, you must confirm that you do not make ‘cash’ payments and that to the best of your ability you ensure they are paying tax liabilities to HMRC.
* You commit to ensuring that this statement/policy is shared with all employees. This is to ensure that your commitment is filtered throughout your organisation and they have awareness of the effect facilitating tax evasion will have.
 |  |   |  |  |
|  |  |  |  |  |  |
| 1. **Quality Management**
 |  | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you have a documented Quality Management System?** |  |   |   |  |
|  | **If Yes Go to question B if No go to question C** |  |
| **B** | **Is it third party audited and certificated BS EN ISO 9001** |  |   |  |  |
|  | **If No**  |  |
| **C** | **Are you prepared to work to the Port's Quality Management system?** |  |   |  |  |
|  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Health & Safety Management**
 | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you employ more 5 or more persons?**  |   |  |  |
| **If No go to question B if Yes go to question C** |  |
| **B** | **As you do not employ 5 or more persons and do not have a written Health and Safety Policy do you confirm any project under the control of Port of Tilbury London limited will be conducted in such a way that it complies fully with the Health and Safety Policy of Port of Tilbury London Limited.**  |  |   |  |
| **If Yes go to Question 3A** | **Yes** | **No** | **POTLL Use Only** |
| **C** | **Do you have a documented Safety Management System and Policy?** |   |  |  |
| **D** | **Is the Policy signed by the Managing Director?**  |   |   |  |
| **E** | **Is it third party audited and certificated e.g. OHSAS 18001?** |   |  |  |
| **4.** | **Health & Safety Management** | **Yes** | **No** | **POTLL Use Only** |
| **F** | **Have you appointed a competent person to provide Health and Safety Advice? If yes, please provide name and contact details.****Name:****Telephone:** |  |  |  |
| **G** | **Do you undertake the process of Risk Assessments?**  |  |  |  |
| **H** | **Has your Company established Safe Systems of Work (Method Statements)?** |  |   |  |  |
| **I** | **Do you have a reporting system for reporting accidents?** |  |   |   |
| **J** | **Do you have a reporting system for near misses?** |  |  |  |
| **K** | **Has the Company ever been prosecuted by an enforcement authority (e.g. HSE or local authority)? To proceed you must provide evidence from the link below:** **Please refer to http://www.hse.gov.uk/enforce/index.htm** |  |  |  |
| **L** | **Has the Company ever been issued with an improvement notice or prohibition notice by an enforcement authority ((e.g. HSE or local authority)?** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Waste Management – Please complete if applicable**
 | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you hold a Waste Carriers Licence?**  |   |  |  |
| **B** | **Waste Management Licence (or Exemption Certificate)?** |   |  |  |
| **C** | **Hazardous Waste Licence?** |   |  |  |
| **D** | **Hauliers Operators Licence?** |   |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Environmental Management**
 | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you have a documented Environmental Management System?** |   |   |  |
| **If Yes Go to question B if No go to question C** |  |
| **B** | **Is it third party audited and certificated to BS EN ISO 14001?** |   |  |  |
| **C** | **Are you prepared to work to the Ports Quality Management System?** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Modern Slavery & Sustainable Procurement Strategy Policy / Statement**
 | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you have a Modern Slavery and Sustainable Procurement Policy / Statement?**  |   |   |  |
| **If Yes Go to question B if No go to question C.** |  |
| **B** | **Can you provide a copy of your Modern Slavery and Sustainable Procurement Strategy Policy / Statement?** |   |  |  |
| **C** | **Have you read and understood the Port’s Modern Slavery & Sustainable Procurement Policy?** |  |  |  |
| **If Yes, Go to question D if No, please confirm you have read the Port’s document.** |  |  |  |
| **D** | **Are you prepared to work to the Ports Modern Slavery and Sustainable Procurement Policy?** |  |  |  |
| **E** | **Do you audit your supply chain for Modern Slavery compliance?** |  |  |  |
| **If Yes, Go to question F if No, please go to question G.** |  |  |  |
| **F** | **Please give details:** |  |  |  |
| **G** | **Are you prepared to?** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Energy Management**
 | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you have a documented Energy Management Process/System?** |   |   |  |
| **If Yes Go to question B if No go to question C** |  |
| **B** | **Can you provide a copy of your energy management plan? Please also refer to the Port’s statement.** |   |  |  |
| **C** | **If no you will be expected to provide a roadmap highlighting how you intend to manage energy in the future.** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Tiering Compliance**
 | **Yes** | **No** | **POTLL Use Only** |
| **A** | **Do you audit / manage your supply chain, in particular your tier 1 and tier 2 suppliers?** |   |   |  |
| **If Yes Go to question B if No go to question C** |  |
| **B** | **Can you provide a statement demonstrating how this is performed.** |   |  |  |
| **C** | **If no you will be expected to provide a roadmap highlighting how you intend to manage tiering in the future.** |  |  |  |

**\_\_\_\_\_\_\_\_\_\_END\_\_\_\_\_\_\_\_\_\_**

**Thank you for completing the supplier evaluation form.**

**Please email your completed form and copies of your supporting documentation to:**

**tracey.ashdown@potll.com**

**vendors@potll.com**