



**C & A**

Engineering Services

**PROCUREMENT SUB-CONTRACTOR SELECTION QUESTIONNAIRE**

The questionnaire is designed to assist in the assessment of sub-contractor's capability to implement, monitor and control all aspects of Health and Safety Legislation relevant to their work. This document must be completed by all sub-contractors and approved by C & A Engineering Services Ltd Ltd before a contract is awarded.

<b>Name of Sub-contractor:</b>	
<b>Nature of Business:</b>	
<b>Address:</b>	
<b>Telephone No.</b>	
<b>Fax No.</b>	

**General Requirements**

Year Company Established: .....

Head Office Address: .....

Company Registration No: .....

VAT No: .....

Registered Office Address:  
(If different) .....

Contact Name: .....

Contact Position: .....

Contact No: .....

Contact Mobile: .....

Contact e-mail Address .....

Web Site Address: .....

Name & Address of Parent  
Company: .....

.....

**C & A**

Engineering Services

**PROCUREMENT SUB-CONTRACTOR SELECTION QUESTIONNAIRE****Insurance Details:**

Public Liability:	Insurers Name and address:  Policy Number: Renewal Date: Indemnity Limit (Value):	
Employer's Liability:	Insurers Name and address:  Policy Number: Renewal Date: Indemnity Limit (Value):	
Professional Indemnity:	Insurers Name and address:  Policy Number: Renewal Date: Indemnity Limit (Value):	
All Risks:	Insurers Name and address:  Policy Number: Renewal Date: Indemnity Limit (Value):	

***Enclose all current copies of insurance information detailed above*****Health and Safety**

No.	QUESTION	ANSWER
1.1	Who has overall responsibility for Health and Safety within your organisation?	
1.2	Position in the Organisation.	
1.3	What safety experience or qualification does that person have?	
1.4	Do you employ the services of a safety officer, safety advisor or safety consultant? If yes, please give their name and telephone number. <b>Please enclose details and CV</b>	
1.5	Does your organisation employ more than 5 persons, if so please enclose a copy of your Health and Safety Policy.	
1.6	Please give details of Health and Safety training given to your foremen / supervisors / site managers within the last 3 years. <b>Please Provide Examples.</b>	
1.7	What procedures do you adopt to carry out risk assessments, who is responsible for making them? <b>Enclose Example</b>	
1.8	Please provide examples of site specific risk assessments and method statements relevant to our works.	
1.9	What procedures do you adopt to carry out C.O.S.H.H. assessments, who is responsible for making them? <b>Enclose</b>	



**C & A**

Engineering Services

## PROCUREMENT SUB-CONTRACTOR SELECTION QUESTIONNAIRE

	<b>Example</b>	
1.10	What procedures do you adopt to ensure that all plant and equipment on site is used and maintained in safe condition?	
1.11	Please provide details of any formal notices /prosecutions that have been issued against your company in the last five years by the HSE.	
1.12	Please give details of any reportable accidents or dangerous occurrences within your organisation within the last 3 years.	
1.13	Please describe your procedures for investigating accidents or dangerous occurrences.	
1.14	Please give any further information which you may consider of assistance to us when assessing your capability to fulfil your Health and Safety duties and responsibilities.	
1.15	How many persons do you employ? (state overall numbers) ( <i>identify status in numbers i.e. subcontractor /CIS /part time etc</i> )	
1.16	Is it your intention to sublet any elements of your contract?	0
1.17	Do you check competence of your sub-contractors? How?	
1.18	Please give details of Company memberships with SSIP ie CHAS, Safecontractor, Constructionline ect. <b>Please Enclose Certificate</b>	
1.19	Please give details of Company memberships with Trade Organisation / Professional Associates (i.e., GAS SAFE, NICEIC etc): <b>Please Enclose Certificate</b>	

### Management Systems

2.01	ISO 9000 Award: (If yes please provide copies of relevant certificates)	Yes / No
3.01	Does your Company hold Environmental Management System Certificated (If yes please provide copies of relevant certificates)	Yes / No



**C & A**

Engineering Services

**PROCUREMENT SUB-CONTRACTOR SELECTION QUESTIONNAIRE**

Please sign to declare that all information provided is current and correct.

The Person Responsible for Health and Safety (section 1.2 ) in your organisation to sign below.

<b>Signed:</b>	
<b>Name of Signatory:</b>	
<b>On Behalf of:</b>	
<b>Position in the Organisation:</b>	
<b>Date:</b>	

**Reviewed & Approved on behalf of C & A Engineering Services Ltd**

<b>Signed:</b>	
<b>Name of Signatory:</b>	
<b>Position in the Company:</b>	
<b>Date:</b>	
<b>Review Date</b>	