

RESPONSE SCHEDULES

Contract No.: MCHC 004 – 5 No Dwellings Roof Replacement

Tender Form

Tender: Mareeba Community Housing Company - Exterior painting and Maintenance

[TENDERER TO INSERT CORRECT LEGAL ENTITY OF TENDERER]:

1. lodges a Tender to perform the Works in accordance with the Tender Documents, incorporating:

(a) the Request for Tender; and

(b) the following Addenda:

[TENDERER TO INSERT ADDENDUM NO. AND NAME]
[TENDERER TO INSERT ADDENDUM NO. AND NAME]
[TENDERER TO INSERT ADDENDUM NO. AND NAME]

2. agrees that it will complete the Works within [TENDERER TO INSERT NUMBER OF CALENDAR DAYS OR WEEKS] of the date of acceptance of Tender;

3. acknowledges that it has read and understood the Tender Documents and in particular all of its obligations under, warranties given or to be given in, and representations made or to be made in the Tender Documents or any part of them; and

4. acknowledges that this Tender remains valid and open for acceptance until the end of the Tender Validity Period.

Signed for and on behalf of the Tenderer by:

Name: [TENDERER TO INSERT NAME OF SIGNATORY]

Position: [TENDERER TO INSERT POSITION OF SIGNATORY]

Signature: [TENDERER TO SIGN]

Date: [TENDERER TO INSERT DATE]

who warrants that they are duly authorised to sign for and on behalf of [TENDERER TO INSERT NAME OF TENDERER]

Note: The Tender Form is to be signed for and on behalf of the Tenderer by a person or persons having full authority to bind the Tenderer for the purposes of the Tender and evidence of such authority must be provided on request.

Schedule A – Tenderer Details, Conflict of Interest and Legal Matters

Schedule A1 – Tenderer Details

Name of Tenderer:

Head Office Address:

Local Branch Office Address:

ABN or ACN:

Trading As:

QBCC Contractor's Licence No:

QBCC Licence Category:

Telephone Number:

Name of Directors:

Name of Manager:

Name of Secretary:

Name of Parent Company:

Names of Subsidiary and Associated
Companies:

Is the Tenderer acting as a trustee of a Trust?

Name and Details of Tenderer's Trust*

Trust Name:

Names and addresses of all of beneficiaries:

* **Note:** The Tenderer is to include a copy of the trust deed, tick if attached: Yes ☐ No ☐

Schedule A2 – Tenderer's Representative

Please identify the person who will be the Tenderer's representative during the Procurement Process.

Name of Representative:

Office Number:

Mobile Number:

Email address:

Postal Address:

Schedule A3 – Conflict of Interest

Will any actual or potential conflict of interest in the performance of the Tenderer's obligations under the Contract exist if the Tenderer is awarded the contract, or are any such conflicts of interest likely to arise during the life of the contract?

Yes ☐ No ☐

If Yes, please provide details of any actual or potential conflict of interest and the way in which any conflict will be dealt with below:

Schedule B – Insurances

The Contract describes the insurance requirements for the project. The Tenderer is to provide details of its insurances and attach certificates of insurance for the following:

WORKERS COMPENSATION

Policy Number:

Expiry Date:

PUBLIC LIABILITY

The Principal to be noted as an interested party on the policy

Insurance Company:

Policy Number:

Expiry Date:

Indemnified amount for any one occurrence:

Any Limit of Indemnity:

CONTRACT WORKS INSURANCE

The Principal to be noted as an interested party on the policy

Insurance Company:

Policy Number:

Expiry Date:

Indemnified amount for any one occurrence:

Any limit of indemnity:

Schedule C – Experience and Technical Capacity

Provide details of works similar to this Contract currently underway by the Tenderer:

Project Name	Works Performed Relevant to Tendered Project	Amount of Contract (\$AUD)	Start Date	Anticipated Completion Date
		\$		
		\$		
		\$		

Please provide details of works similar to this Contract by the Tenderer:

Project Name	Works Performed Relevant to Tendered Project	Amount of Contract (\$AUD)	Client Name and Contact Details
		\$	
		\$	
		\$	

Schedule D – Management Systems

Schedule D1 – Work Health and Safety

This Schedule forms part of the tender evaluation and is to be completed by the Tenderer.

The Tenderer must, if and when requested to do so by the Principal, verify the responses noted in this Schedule by providing copies of relevant policies, procedures, certificates etc. that provides evidence of their ability and capacity to effectively manage their WHS responsibilities for the contract.

Item	Tick Yes or No
1. Does your business or organisation have third party certification for work health and safety, e.g. to AS/NZS 4801 or other?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, by whom: Certificate Number: <i>(Attach a copy of your Accreditation Certificate)</i>	
2. Does your business or organisation have a random drug and alcohol Policy? <i>(Attach a copy of your Policy)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
IF TENDERER HAS ANSWERED 'YES' TO QUESTIONS 1 AND 2, TENDERER IS NOT REQUIRED TO COMPLETE QUESTIONS 3 TO 9.	
3. Does the Tenderer have an internal work health and safety management system or plan (not third party certified)? <i>(If yes, attach evidence such as a copy of the manual)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Does your business or organisation have documented safe work methods statements (SWMS) and other procedures for all identified high-risk work?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Does your business or organisation have appropriate systems and/or documented procedures for reporting of incidents and hazards?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Is there a person appointed to look after health and safety in the workplace?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, state person's name and position: Name: Position:	
7. Are all employees aware of their obligations for personal protective equipment (PPE)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Does your business or organisation have current and appropriate qualifications, licences to undertake each task?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Item	Tick Yes or No
9. Does your business or organisation undertake appropriate on site induction and training relevant to each task?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Workplace Health and Safety Record	Tick Yes or No
1. Has your business or organisation been issued any improvement, infringement or prohibition notices by any workplace health and safety regulator in the past two years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Has your business or organisation been prosecuted by any workplace health and safety regulator in the past 5 years.	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Have any of the directors of your business or organisation or the Key Personnel listed in Schedule F1 been prosecuted by any workplace health and safety regulator in the past 5 years.	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Is your business or organisation currently the subject of an investigation by any workplace health and safety regulator as a result of the occurrence of a notifiable incident or has your business or organisation been investigated by any workplace health and safety regulator in the past 5 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Are any of the directors of your business or organisation or the Key Personnel listed in Schedule F1 currently the subject of an investigation by any workplace health and safety regulator as a result of the occurrence of a notifiable incident or have any of them been investigated by any workplace health and safety regulator in the past 5 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. In the last five years, have any fatalities occurred on a site where your business or organisation was the head contractor?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Schedule E – Quality Assurance

The Tenderer must, if and when requested to do so by the Principal, verify the responses noted in this Schedule by providing copies of relevant quality policies, procedures, certificates etc. that provides evidence of their quality requirements for the contract.

Item	Tick Yes or No
1. Does your business or organisation have third party certification for Quality, e.g. to ISO 9001 series or other?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, by whom: Certificate Number: <i>(Attach a copy of your Accreditation Certificate)</i>	
IF TENDERER HAS ANSWERED 'YES' TO QUESTIONS 1, TENDERER IS NOT REQUIRED TO COMPLETE QUESTIONS 2 TO 6.	
2. Does the Tenderer have an internal quality system or plan (not third party certified)? <i>(If yes, attach evidence such as a copy of the manual)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Does the Tenderer have a quality policy? <i>(If yes, attach evidence of the Policy)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Does the Tenderer have documented quality procedures? <i>(If yes, attach evidence or copy of the procedures)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Are records of inspection, test and other quality assurance or quality control activities maintained and quality records kept for each specific project?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Does the Tenderer undertake internal quality audits on a project or contract specific basis?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Schedule F – Work procedures and methodology

The Tenderer is to provide with its Tender a statement of its proposed arrangements, procedures and methodologies to be adopted by it in carrying out the Works. In doing so, this statement is to address the following points:

- (a) a brief overview of the methodology proposed by the Tenderer for the execution of the Works;
- (b) an understanding of the project objectives and deliverables;
- (c) how it will identify potential problems that may arise during performance of the Works;
- (d) how it will overcome any such problems. Provide potential solutions to those problems;
- (e) identify construction/project risks and strategies for management and mitigation of these risks;
- (f) comments on constructability;
- (g) commissioning and handover management proposed;
- (h) defect rectification management proposed;

Schedule H – Program of Works

The Tenderer is to submit with its Tender a Program for its performance of the Works which is to:

- (a) demonstrate that the Tenderer could, if awarded the contract, satisfactorily complete the Works
- (b) show how the Works will be executed including the commencement and completion dates of each trade and/or subcontract work activity, procurement activities and supply contract activity.

Schedule I – Pricing, Cash Flow and Variation Rates

Provide supporting quotation price