

Catering opportunity at the Horniman Museum and Gardens

Qualification Questionnaire

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Introduction

This questionnaire is comprised of practical questions that must be answered in order for your tender to be compliant.

Horniman requires applicants to provide all the information requested in the qualification questionnaire.

Please note:

1. The term organisation within the questionnaire includes a sole trader, partnership, co-operative or company and should be interpreted accordingly.
2. If a company, please answer the questions specifically for your company not for the group if you are part of a group of companies. Where, however, group policies, statements, etc. are normally used in your company please answer accordingly.
3. Please complete the questionnaire in English. All monetary values must be quoted in GBP.
4. Any element of the questionnaire partially completed may invalidate your application.
5. Please include where appropriate, any supporting documents marking clearly on all enclosures the name of your organisation and the number of the question to which they refer.
6. The Horniman will not reimburse any expense incurred by the applicant in preparing their responses to this questionnaire.
7. An electronic pdf copy of the completed questionnaire and supporting documents must be submitted and received no later than noon 8th December 2023.

Trading information

Item	Evaluation	Information Required	Response
1.1	Pass/Fail	Full legal name of the organisation in whose name the tender would be submitted.	
1.2	Pass/Fail	Type of organisation	Please tick i a public limited company <input type="checkbox"/> ii a limited company <input type="checkbox"/> iii a sole trader <input type="checkbox"/> iv a partnership <input type="checkbox"/> v other <input type="checkbox"/> please specify
1.3	Pass/Fail	Principal contact name and position	
1.4	Pass/Fail	Address	
1.5	Pass/Fail	Company registration number	
1.6	Pass/Fail	Date of registration under the Companies Act 2006	
1.7	Pass/Fail	Organisational chart of the executive, management and operational levels involved in providing your services.	Enclosed? Yes/No

Financial Information

Item	Evaluation	Information Required	Response
2.1		<p>Please state annual turnover of the organization. Given issues with Covid, please provide data from the 2021/2022 & if available the 2022/2023 financial years</p> <p>Provision of appropriate information represents a pass.</p>	<p>Annual Turnover £</p> <p>For year</p> <p>Annual Turnover £</p> <p>For year</p>
2.2		VAT registration number	
2.3		Has the company traded under any other name in the last 10 years? If so, give full details.	
2.4		Please state the level of any capital investment made in the past three years	
2.5		Please state the company's latest net debt position	

2.6	Pass/Fail	<p>For organisations submitting the application please submit one copy of the following:</p> <p>Limited Companies: The last two years full audited accounts and management profit and loss (as prepared for shareholders) and the consolidated accounts of the ultimate shareholding company if applicable.</p> <p>Where the company is a division of a larger company, please submit details for the division submitting the application, not the larger company.</p> <p>Sole traders and partnerships: If audited accounts are not available, please provide a copy of the last two years' management accounts (including a detailed profit and loss account and balance sheet)</p> <p>New organisations: If the organisation proposed is a new business, full details should be provided on the company structure, source of funding and a letter from the business guarantor detailing the nature of the guarantee and the level of financial guarantee being offered.</p>	<p>Provision of appropriate information represents a pass.</p> <p>Enclosed? Yes/No</p>
2.7	Pass/Fail	Please state how your business has been impacted by Covid19 and whether there are any significant financial legacies from Covid 19 that we should be aware of.	
2.8	Pass/Fail	Please state the source of funding for any capital equipment purchases (if relevant)	

Professional standing

Item	Evaluation	Information required - Has the organisation or any of the Directors/Partners/ Proprietor:	Response
3.1	Pass/Fail	Been convicted of a criminal offence relating to the conduct of your business or a similar business?	Yes/No
3.2	Pass/Fail	Been declared bankrupt, insolvent, been subject to a compulsory winding up, in receivership, in composition with creditors or subject to relevant proceedings?	Yes/No
3.3	Pass/Fail	Breached the terms of any banking covenants, loans or lease agreements or been in discussion with any bank or debt providers concerning potential breaches?	Yes/No
3.4	Pass/Fail	Any outstanding claims or litigations against the business or individuals?	Yes/No
3.5	Pass/Fail	Any material pending or threatened litigation or legal proceedings?	Yes/No
3.6	Pass/Fail	Been prosecuted under any Health and Safety, Food Safety or Environmental Health legislation?	Yes/No
3.7	Pass/Fail	Been issued with a prohibition notice under relevant health and safety or food safety legislation in the past 5 years?	Yes/No
3.8	Pass/Fail	Been formally or informally investigated by the Office of Fair Trading?	Yes/No
3.9	Pass/Fail	Been unable to fulfil its obligations in relation to payment of taxes and/or social security contributions?	Yes/No
3.10	Pass/Fail	Been the subject of any reports or investigations by regulatory or taxation authorities?	Yes/No
3.11	Pass/Fail	Been refused insurance in relation to Employers' Liability Insurance, Public Liability or Buildings and Contents Insurance?	Yes/No
3.12	Pass/Fail	If you have replied yes to any of the questions in this section, please supply brief details below and provide contact details for further information if required	

Before returning this application form, please ensure that you have:

- 1 Answered all questions appropriate to your application.
- 2 Enclosed all relevant documents and put the number of the question to which they refer on them.
- 3 Signed the undertaking below.

Please note:

The responsibility for ensuring that this form is received by the date specified rests with the applicant.

Failure to return the application form on time or fully completed with all enclosures may result in your application not being processed.

When you have completed the questionnaire, please sign below.

I/We certify that if this questionnaire is received in electronic form that we have made no alterations to the questions asked. I/We understand that if it is found that alterations, whether by addition, omission, or substitution and whether made purposefully or not, have been made to the questions that I/we may be excluded from further consideration for the contract.

I/We certify that the information supplied is accurate to the best of my/our knowledge and that I/we accept the conditions and undertakings requested in the questionnaire. I/We understand that false information could result in my/our exclusion from consideration for the contract.

I/We understand that any applicant who directly or indirectly canvasses any member or official of HM&G or their financial or legal advisers, concerning the award of the contract or engages in any other corrupt practice involving employees of The HM&G or their advisers will be disqualified

Form completed by:

Name: Tel No:

Signature: Date:

Position:

Thank you for completing this questionnaire. This should be signed by the applicant, a partner or authorised representative in her/his own name and on behalf of the organisation.