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**INVITATION TO TENDER**

**VOLUME 2**

**(Response Document)**

**for the Provision of**

**Evaluation Consultant**

**QUALIFICATION QUESTIONNAIRE**

|  |
| --- |
| **Part 1: Your information and the bidding model** |
| Please answer all questions in this questionnaire. If a question is not applicable, please indicate that rather than leave the answer blank. |

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| **Your information** | | |
| **Question number** | **Question** | **Response** |
| 1.1(a) | Name (if registered, please give the registered name) |  |
| 1.1(b) – (i) | Registered address (if applicable) or head office address |  |
| 1.1(b) – (ii) | Registered website address (if applicable) |  |
| 1.1(c) | Trading status  a) - public limited company  b) - private limited company  c) - limited liability partnership  d) - other partnership  e) - sole trader  f) - third sector  g) - other (please specify your trading status) |  |
| 1.1(d) | Date of registration (if applicable) or date of formation. |  |
| 1.1(e) | Registration number (company, partnership, charity, etc if applicable). |  |
| 1.1(f) | Registered VAT number. |  |
| 1.1(g) - (i) | Are you registered with the appropriate professional or trade register(s) specified for this procurement in the country where your organisation is established? | Yes  No  N/A |
| 1.1(g) - (ii) | If you responded yes to 1.1(g) - (i), please provide the relevant details, including the name of the register and registration number(s), and if evidence of registration is available electronically, please provide  - the website address,  - issuing body  - reference number. |  |
| 1.1(h) - (i) | For procurements for services only, is it a legal requirement in the country where you are established for you to:  a) possess a particular authorisation, or  b) be a member of a particular organisation,  to provide the requirements specified in this procurement? | Yes  No |
| 1.1(h) - (ii) | If you responded yes to 1.1(j) - (i), please provide additional details of what is required, confirmation that you have complied with this and, if evidence of compliance is available electronically, please give the website address, issuing body and reference number. |  |
| 1.1(i) | Relevant classifications (state whether you fall within one of these, and if so which one)  a) Voluntary Community Social Enterprise (VCSE).  b) Sheltered Workshop.  c) Public service mutual. | (a)  (b)  (c) |
| 1.1(j) | Are you a Small, Medium or Micro Enterprise ([SME](https://www.gov.uk/government/publications/procurement-act-2023-short-guides/supplementary-information-small-and-medium-sized-enterprises-definition-html#small-and-medium-sized-enterprises-definition-supplementary-guidance))[[1]](#footnote-2) | Yes  No |
| 1.1 (k) | Details of connected persons  - Name  - Date of birth  - Nationality  - Country, state or part of the UK where the connected usually lives  - Service address  (Please enter N/A if not applicable) |  |
| 1.1(l) | Details of your immediate parent company:  - Full name of immediate parent company,  - Registered or head office address,  - Registration number (if applicable),  - VAT number (if applicable)  (Please enter N/A if not applicable) |  |
| 1.1(m) | Details of ultimate parent company:  - Full name of ultimate parent company,  - Registered or head office address,  - Registration number (if applicable),  - VAT number (if applicable)  (Please enter N/A if not applicable) |  |
| Please note: A criminal record check for relevant convictions may be undertaken for the preferred supplier and all relevant persons and entities (as described above). | | |

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| **Part 2 – Questions relating to conditions of participation – Standard Questions** | | | | | | |
| **Part 2A - Insurance** | | | | | | |
| **Question number** | **Question** | | | | **Response** | |
| **2.1** | Please confirm whether you already have, or can commit to obtain, prior to the award of the contract, the levels of insurance cover indicated below:   1. Employer’s (Compulsory) Liability Insurance\* = £5m 2. Public Liability Insurance = £5m 3. Professional Indemnity Insurance = £0.5m 4. Product Liability Insurance = n/a   \*There is a legal requirement for certain employers to hold Employer’s (Compulsory) Liability Insurance of £5 million as a minimum. See the Health and Safety Executive website for more information: [www.hse.gov.uk/pubns/hse39.pdf](http://www.hse.gov.uk/pubns/hse39.pdf). | | | | Yes ☐  No ☐    **[Insert details of your insurances already in place]**  **[Insert details of your insurances which would be obtained following contract award (including information on how you will obtain this insurance – e.g. a quote)]** | |
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| **Confirmation** | |
| By submitting this questionnaire, I confirm and agree that:     * to the best of my knowledge the answers submitted and information contained in this document are complete, accurate and not misleading * upon request and without delay I will provide any additional information requested of us * I understand that the response to this questionnaire will be used to assess whether our organisation is entitled to participate in, or continue to participate in, this procurement * I understand that our organisation may be excluded from the procurement if requested information has not been provided, if any of this response or any follow up responses are incomplete, inaccurate or misleading, if confidential information has been accessed or if we have unduly influenced your decision-making in this procurement * I have read the Specification in full and confirm that our organisation is able to meet all minimum requirements * I am aware of the consequences of serious misrepresentation | |
| **Contact details of those making the declaration** | |
| Contact name |  |
| Name of organisation |  |
| Role in organisation |  |
| Phone number |  |
| E-mail address |  |
| Postal address |  |

**Annex A – Quality Questionnaire**

**QUALITY QUESTIONNAIRE**

PLEASE RESPOND TO EACH QUESTION IN ISOLATION. ONLY THE DETAILS PROVIDED IN RESPONSE TO THE QUESTION WILL BE USED IN EVALUATION OF THAT QUESTION. EVALUATORS WILL NOT CROSS REFER TO THE RESPONSES TO OTHER QUESTIONS. YOU CAN SUBMIT THIS INFORMATION IN A SEPARATE DOCUMENT AS LONG AS YOU CLEARLY LABEL THE QUESTIONS. \*Please refer to Section 4 of the ITT Document for further guidance.

|  |  |  |
| --- | --- | --- |
| **1** | **METHODOLOGY AND APPROACH**  Please answer this question in no more than 4 sides of A4.  **Please set out your methodology and approach for this project** | **50%** |
|  | Your response will be evaluated against the following sub-criteria:   * Demonstrates understanding of the project (20%) * Clear methodology which covers all aspects of the project (60%) * Approach to working with the client and project team (20%) |  |
|  | **RESPONSE** |  |
| **2** | **RELEVANT EXPERIENCE**  Please answer this question in no more than 4 sides of A4.  Please outline the relevant experience and proven track record that you have in delivering evaluation frameworks and evaluation reports in relation to large capital cultural/ heritage projects which also include the delivery of activity plans, new interpretation and business plans e.g. National Heritage Lottery Fund | **50%** |
|  | Your response will be evaluated against the following sub-criteria:   * Demonstration of projects of a similar scale (25%) * Experience of National Heritage Lottery Fund requirements (25%) * Demonstration of projects which included capital, activity plan, business plan, interpretation works (25%) * Demonstration of developing Evaluation frameworks as well as delivery of the Evaluation itself (25%) |  |
|  | **RESPONSE** |  |

**PRICING SCHEDULE**

Bidders must complete the Pricing Schedule as below, with all the proposed charges/prices to provide the requirement(s) in accordance with the specification. This may include supplementary spreadsheets to provide transparency of the metrics used for calculating fixed, minimum and variable charges. The below should include all expenses.

|  |  |  |
| --- | --- | --- |
| **ACTIVITY** | **No. of days** | **Price (£)** |
| Development of Evaluation Framework including toolkit to capture information |  |  |
| Preparation of Evaluation of Development Phase |  |  |
| Any other activities in Development Phase |  |  |
| **Total Development Phase Fee** |  |  |
| Preparation of Annual Interim Evaluation during Delivery Phase |  |  |
| Preparation of final Evaluation Report |  |  |
| Any other activities in Delivery Phase |  |  |
| **Total Delivery Phase Fee** |  |  |
| **Grand TOTAL** |  |  |

**Day rates for additional work (for information only)**

|  |  |
| --- | --- |
| **Role** | **Day Rate (£)** |
| Director/Partner |  |
| Senior Consultant |  |
| Consultant |  |
| Assistant |  |

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**CONFLICT OF INTEREST, CANVASSING & COLLUSIVE TENDERING**

**It is a mandatory requirement that the Supplier signs and complies with this certificate. FAILURE TO SUBMIT THIS DECLARATION WHEN RESPONDING TO THE TENDER WILL RESULT IN YOUR TENDER NOT BEING EVALUATED**

DECLARATIONS

|  |  |
| --- | --- |
| **Tender for Contract:** |  |
| **Supplier Name:** |  |

CONFLICT OF INTEREST, CANVASSING & COLLUSIVE TENDERING

1 In consideration of the Council accepting our tender we undertake and agree to advise the Council immediately upon becoming aware of any conflict of interest or potential conflict of interest, whether deliberate or otherwise, that may arise either during the term of the Contract or for a period of two years after its termination.

2 I/We further hereby undertake that I/We will not in the future canvass or solicit any Member Officer or Employee of the Council in connection with the award of this Tender or any other Tender or proposed Tender for the provision of the Service and that no person employed by me/us or acting on my/our behalf will do any such act.

3 I/We certify that

(a) this is a bona fide Tender, intended to be competitive, and that I/We have not fixed or adjusted the amount of the Tender (or the rates and prices quoted) by or under or in accordance with any agreement or arrangement with any other person.

(b) I/We have not canvassed or solicited any Member Officer or Employee of the Council in connection with the preparation or award of this Tender or any other Tender or proposed Tender for the provision of the Goods/Services and that no person employed by me/us or acting on my/our behalf has done any such act.

(c) that I/We have not done and undertake that I/We will not do at any time before the hour and date specified for the return of this Tender any of the following acts:

1. Offer or give or agree to give any officer or member of the Council any gift or consideration of any kind as an inducement or bribe to influence its decision in the tendering procedure.

(ii) Communicated to any person other than the Council the amount or approximate amount of the proposed Tender (other than in confidence in the circumstances and to the persons described in the Guidance & Instructions).

(iii) Enter into any agreement or arrangement with any person as to the amount of any proposed tender or that the person shall refrain from tendering.

**Person authorised to submit the Tender:**

|  |  |
| --- | --- |
| Signature |  |
| Contact name |  |
| Name of organisation |  |
| Role in organisation |  |
| Dated |  |

1. See definition of SME https://www.gov.uk/government/publications/procurement-act-2023-short-guides/supplementary-information-small-and-medium-sized-enterprises-definition-html#small-and-medium-sized-enterprises-definition-supplementary-guidance [↑](#footnote-ref-2)