

## SUB CONTRACTOR/SUPPLIER QUESTIONNAIRE

| Section 1 – Subcontractor Details |   |  |                       |             |
|-----------------------------------|---|--|-----------------------|-------------|
| 1.1                               | Name of Company                             | Tenby Safety Solutions                     |                       |             |
| 1.2                               | Address                                     | 10 Bridge Road, Stokesley, North Yorkshire |                       |             |
|                                   |   | Postcode                                   | TS9 5AA               |             |
| 1.3                               | Telephone No.                               |  | Mobile No.            | 07772759623 |
| 1.4                               | Email Address                               | tenbysafetysolutions@gmail.com             |                       |             |
| 1.5                               | Description of activities carried out       | Safety Services / Administration           |                       |             |
| 1.6                               | Company Registration No                     | 08942924                                   | Date of Incorporation | 17/04/2014  |
| 1.7                               | VAT Number                                  | 189588527                                  | UTR Number            | 46761 44296 |
| 1.8                               | Current Annual Turnover                     | £31,200 est. (Infratec Only)               | Number of Employees   | 1           |
| 1.9                               | Do you sub-let any work?                    | YES/ <del>NO</del>                         |                       |             |
|                                   | If YES, please supply details               |  |                       |             |
| 1.10                              | Do you operate nationally or regionally?    | Nationally                                 |                       |             |
| 1.11                              | Registered Office (if different from above) |  |                       |             |


| Section 2 – Directors & Partners |               |          |              |
|----------------------------------|---------------|----------|--------------|
| 2.1                              | Name          | Position | Phone Number |
|                                  | Daniel McCann | Director | 07772759623  |
|                                  |               |          |              |
|                                  |               |          |              |

| Section 3 – Bank Details |                                |   |                       |                       |
|--------------------------|--------------------------------|---|-----------------------|-----------------------|
| 3.1                      | Payee Name                     | Bank Name & Address                                 | Account No            | Sort Code             |
|                          | Tenbysafetysolutions@gmail.com | Barclays Bank, 56 Station Road, Redcar.<br>TS10 1DX | Consequent to Invoice | Consequent to Invoice |

| Section 4 – Insurance |                        |                |                      |              |
|-----------------------|------------------------|----------------|----------------------|--------------|
|                       |                        | Limit of Cover | Copy Attached (tick) | No Insurance |
| 4.1                   | Employers' Liability   | £              |                      | X            |
| 4.2                   | Product Liability      | £              |                      | X            |
| 4.3                   | Public Liability       | £              |                      | X            |
| 4.4                   | Contractors All Risk   | £              |                      | X            |
| 4.5                   | Professional Indemnity | £              |                      | X            |

| Section 5 – Health & Safety |   |                         |                      |
|-----------------------------|---|-------------------------|----------------------|
| 5.1                         | Who is responsible for safety within your company   | Name<br>D. McCann       | Position<br>Director |
| 5.2                         | Who provides Health & Safety advice   | Name<br>D. McCann / HSE | Position<br>Director |
| 5.3                         | Have you had any accidents in the past 3 years (include copies of formal notices & legal proceedings) | N/A                     |                      |

| Section 6 – References (Customers) |                 |  |           |             |
|------------------------------------|-----------------|--|-----------|-------------|
| 6.1                                | Name of Company | Pullaine Refractor & Mechanical Services Ltd |           |             |
|                                    | Address         | 8 Adam Close Redcar, Cleveland               |           |             |
|                                    |                 | Postcode                                     | TS10 4QJ  |             |
|                                    | Contact Name    | P. Baldwin                                   | Telephone | 07831800468 |
| 6.2                                | Name of Company | Beau Beauty Clinic Ltd                       |           |             |
|                                    | Address         | Bow st Centre, Bow Street, Guisborough       |           |             |
|                                    |                 | Postcode                                     | TS14      |             |
|                                    | Contact Name    | J. Moore                                     | Telephone | 07792807018 |

| Section 7 – Declaration   |           |           |   |
|---|-----------|-----------|---|
| To my knowledge all the information given on this questionnaire is complete and accurate: |           |           |   |
| Contact Name  | D. McCann | Date      | 19-12-2017  |
| Position  | Director  | Signature |  |