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|  |  |  | DEPARTMENT OFINFRASTRUCTURE, PLANNING AND LOGISTICS |

RESPONSE SCHEDULES

Infrastructure, Investments and Contracts

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **TENDER:** | DARWIN REGION - RAPID CREEK - FLOOD MITIGATION - CONSTRUCTION |  |
| **NUMBER:** | T16-1163 |  |
| **CLOSING:** | **2:00 PM AUSTRALIAN CENTRAL STANDARD TIME****WEDNESDAy, 19th April 2017****(Late Tenders Will Not Be Accepted)** |  |

|  |
| --- |
| **LODGEMENT OF TENDERS:** |
|  |
| **By Electronic Lodgement facility at:**[**www.nt.gov.au/tenders**](http://www.nt.gov.au/tenders) |
|  |
| ***By Facsimile:*** | ***By Post:*** |
| (08) 8999 1935 | Department of Corporate and Information ServicesGPO Box 1551Darwin NT 0801 |
|  |  |
| **Note: no other form of delivery is acceptable.** |

|  |
| --- |
| **TENDERER DETAILS** |

|  |  |
| --- | --- |
| Legal Entity Name |  |
|  |
| Trading as |  |
|  |
| ABN |  |  | ACN |  |

|  |  |  |
| --- | --- | --- |
| CAL Registration Number |  | (Required only when specified in the annexure) |
|  |
| Address of Place of Business |  |

|  |  |
| --- | --- |
| Postal Address |  |
|  |
| Telephone |  |  | Facsimile |  |
|  |
| Email Address |  |
|  |
| Web Site |  |

|  |
| --- |
| **CONTACT PERSON DETAILS** |
|  |
| Name |  | Position |  |
|  |
| Telephone |  | Facsimile |  |
|  |
| Email Address |  |

|  |
| --- |
| DECLARATION BY TENDERER |

On behalf of the Tenderer, I/We the undersigned hereby:

Addenda

|  |  |
| --- | --- |
| 1. If applicable confirm receipt and inclusion in the Tender, of the addenda numbered

 For example 1-3 or 1, 2, 3 |  |

Conditions of Contract

1. Agree to be bound by the Conditions of Contract as referred to in Section 2 of the Request for Tender.

Business Status

1. Certify to the best of my/our knowledge:
2. If the Tenderer is an individual, that he or she:
3. is not a bankrupt; or
4. has not assigned his or her estate for the benefit of creditors.
5. If the Tenderer is a partnership, no step has been taken to dissolve that partnership.
6. If the Tenderer is a company:
7. that no application or order has been made for the winding up of the company (whether voluntary or otherwise);
8. that no resolution has been passed for the winding up of the company; or
9. that the company is not under:
10. an arrangement and/or reconstruction (ie. restructuring a public company);
11. an appointed liquidator, provisional liquidator or administrator;
12. an appointed receiver or manager (or both);
13. official management; or
14. any composition or arrangement or assignment with, or for the benefit of, its creditors or a class of them.

Offer

1. Having examined and acquired an actual knowledge of the Request for Tender offer to perform the whole of the Works in accordance with this Request for Tender at the amounts tendered in the completed schedules attached
2. Agree the offer shall remain valid for acceptance for a period of 60 days from the closing date.

|  |  |
| --- | --- |
| If lodging electronically, acknowledge acceptance of the above by placing an “X” in this box |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

 (Not necessary if lodging electronically)

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Position |  |
| (Print name and position in business) |

(\*Add additional signature block as necessary)

|  |
| --- |
| SCHEDULE OF RATES |

The Tenderer shall complete the accompanying Schedule of Rates excel spreadsheet by:

1. Inserting a price (Unit Price, Lump Sum or Rate Price as applicable) in the column marked “**Rate**”for the item of work described in the column marked“**Description**”.
2. All cells shaded **green** must have a price supplied.
3. A formula will automatically multiply the amounts shown in the Estimated Quantity (“**EST QTY**”) and “**Rate**” columns to produce a value in the “**Extended Amount**” column.
4. A formula will automatically compile section totals in the “**Section Total**” column.

The “**Total**” at the bottom of the schedule is an automatically generated sum of all amounts shown in the “**Extended Amount**” column and must be provided below.

**The Schedule of Rates spreadsheet must be submitted as part of the tender documentation.**

The tendered rates, extended amounts and total prices form part of the contract.

All prices entered shall be in whole dollars and cents only.

For example $345.80 is acceptable, $345.80**7** is not acceptable and where prices entered as such the additional digit will be disregarded (not rounded) and the extended amounts amended as required.

***All prices shall include GST.***

|  |  |  |
| --- | --- | --- |
| **TOTAL FROM THE SCHEDULE OF RATES****(including GST)** | $ |  |

|  |
| --- |
| SCHEDULE OF ASSUMPTIONS AND QUALIFICATIONS |

| Tenderers should include in this schedule full details of any assumptions they made in the development of the tender prices. All assumptions, qualifications and exclusions are to be noted here. Qualifications and assumptions noted elsewhere in the submission may not be considered. |
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| RESPONSES TO ASSESSMENT criteria |

**NOTE: Add lines or an attachment if more space is required**

1. PAST PERFORMANCE
	1. Previous Experience

|  |  |
| --- | --- |
|  | **Provide an overview of the organisations experience in providing similar Works.** |
| **a) Identify and describe successful projects undertaken of similar size and scope.****b) Identify any projects undertaken for Northern Territory Government.****c) Define your organisations role in each project.****d) Indicate if team members nominated for this project have worked on the examples provided.****e) Include Contractor Performance reports if possible.** |
|  |
|  |
|  |

* 1. Referees

|  |  |
| --- | --- |
|  | **Tenderer to provide details and referees for at least 3 completed contracts of similar nature, scope and size.** |
| **Contract Description** | **Contract Value $** | **Referees** |
| (Contact Person) | (Company Name and Phone No.) |
|  |  |  | Phone:  |
|  |  |  | Phone:  |
|  |  |  | Phone:  |

|  |
| --- |
| RESPONSES TO ASSESSMENT criteria (cont.) |

**NOTE: Add lines or an attachment if more space is required**

1. TIMELINESS
	1. Construction Program

|  |  |
| --- | --- |
|  | **Provide as an attachment a construction program (in PDF and MPP formats) detailing how timeframes as stated in the scope of works can be achieved. Construction program to include:*** **methodology of construction; considering the following at a minimum:**
	+ **Bulk earthwork:**
	+ **Transport;**
	+ **Restrictions on vehicle size;**
	+ **Restrictions on transport times; and**
	+ **Risk mitigations to deliver the project on within the required timeframe**
* **delivery timeline, clearly indicating:**
	+ **Critical path,**
	+ **Duration of works; and**
	+ **Completion date**
 |
|  |
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|  |

* 1. Methodology

|  |  |
| --- | --- |
|  | **Provide as an attachment a detailed methodology which will be implemented in order to deliver the project within the required timeframe.*** **At a minimum consider the following:**
	+ **Bulk earthworks;**
	+ **Transport;**
	+ **Restrictions on vehicle size;**
	+ **Restrictions on transport times;**
	+ **Risk mitigations to deliver the project on within the required timeframe;**
	+ **Working on multiple fronts; and**
	+ **Public use of nearby facilities, public road users and access to Darwin International Airport**
 |
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| RESPONSES TO ASSESSMENT criteria (cont.) |

**NOTE: Add lines or an attachment if more space is required**

1. LOCAL CONTENT
	1. Enhancing Local Industry

|  |  |
| --- | --- |
|  | **Provide details of Tenderer’s presence in Region of work location, including address of business premises.**  |
|  |
|  |
|  |
|  | **Outline the Northern Territory Industry Component of this Project** |
|  |
|  |
|  |

* 1. Regional development opportunities (where applicable)

|  |  |
| --- | --- |
|  | **Provide an outline of the estimated impact of the project on the immediate region and specific proposals to maximise regional development.** |
|  |
|  |
|  |
|  | **Provide details of community involvement in Region of work location.** |
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| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required\**

**LOCAL CONTENT (continued)**

* 1. How will Services, Suppliers and Labour be utilised?

|  |  |
| --- | --- |
|  | **What goods or services will be required?** |
|  |
|  |
|  |
|  | **What goods or services can local industry tender for?** |
|  |
|  |
|  |
|  | **How will you work with the ICNNT to identify Northern Territory businesses capable of providing goods or services?** |
|  |
|  |
|  |
|  | **What is the estimated local employment during construction?** |
|  |
|  |
|  |

* 1. Enhancement of local business and industry capability

|  |  |
| --- | --- |
|  | **Provide an outline of the proposed skills development as a result of this project.** |
|  |
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| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required**

**LOCAL CONTENT (continued)**

* 1. Suppliers details

|  |  |
| --- | --- |
|  | **Provide details of use of suppliers and/or supplies in relation to the Works.** |
| **Supplier trading name** | **Business premises base** | **Type of supplies** | **Value of supplies****$** | **Recognised Indigenous Business Enterprise (IBE)** |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  | **Where any supplier listed in 3.5.1 is based outside the NT provide details of an alternative NT supplier, including the alternative price details.** |
| **Supplier trading name** | **Business premises base** | **Type of supplies** | **Value of supplies****$** | **Recognised Indigenous Business Enterprise (IBE)** |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required**

**LOCAL CONTENT (continued)**

* 1. Sub-Contractors details

|  |  |
| --- | --- |
|  | **Provide details of all sub-contractors to be utilised in relation to the Works (add space if necessary).** |
| **Registered Trading Name of Proposed Sub-Contractors** | **Business premises base** | **Description of Sub-Contracted Works** | **Value of Sub-Contracted Works****$** | **\*CAL Registration Number of Sub-Contractor**(where applicable) | **\*CAL Rating of Sub-Contractor** (where applicable) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | **Where any sub-contractor listed in 3.6.1 is based outside the NT provide details of an alternative NT sub-contractor, including the alternative price details.** |
| **Registered Trading Name of Proposed Sub-Contractors** | **Business premises base** | **Description of Sub-Contracted Works** | **Value of Sub-Contracted Works****$** | **\*CAL Registration Number of Sub-Contractor**(where applicable) | **\*CAL Rating of Sub-Contractor** (where applicable) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

\*Note – Where the value of the sub-contract component is $100,000 and greater; and the sub-contracted Works is subject to Contractor Accreditation (CAL) the CAL registration number and rating level of the proposed Sub-contractors is required.

|  |
| --- |
| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required**

**LOCAL CONTENT (continued)**

* 1. Local Representation

|  |  |
| --- | --- |
|  | **Provide details of business presence in all locations, and the number of employees in each location.** |
| **Office location(s) (indicate if Head Office/Branch)** | **Number of Full Time Employees** | **Number of Indigenous employees** | **Number of years established in this location** |
|  |  |  |  |
|  |  |  |  |

* 1. Staffing commitment to the Works

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Tenderers are to state the total number of people and estimated number of days to be employed in the execution of the Works.** | **Tenderer** | **Sub-contractors** |
| **Number of employees** | **Number of days of work**  | **Number of employees** | **Number of days of work** |
| **Employees**  |  |  |  |  |
| **Indigenous Employees**  |  |  |  |  |
| **Apprentices**  |  |  |  |  |
| **Indigenous Apprentices** |  |  |  |  |
| **Total number on the job:** |  |  |  |  |

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| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required**

**LOCAL CONTENT (continued)**

* 1. Indigenous Employees

|  |  |
| --- | --- |
|  | **Provide details of Indigenous employees or employment opportunities for Indigenous persons that are currently supported by the Tenderer or will be generated by this requirement within the Region where the works will be undertaken.** |
| **Employer****(Tenderer or Sub-Contractor)** | **Name of Employee** | **Skill/Trade** | **Period of Employment (How long have they been employed)** | **IndicateCurrent/Proposed Date** | **Where will they be utilised for this requirement** |
|  |  |  |  | Current: | [ ]  |  |
| Proposed Date: |  |  |
|  |  |  |  | Current: | [ ]  |  |
| Proposed Date: |  |  |

|  |  |
| --- | --- |
|  | **Provide details of additional/temporary employment opportunities for Indigenous employment that would be created in the Region as a result of this work** |
| **Name of indigenous employee** | **Trade or profession** | **Type of position** | **Where will they be utilised for this requirement.** | **Estimated number of days of work** |
|  |  | ❒ Tradesman❒ Graduate❒ Trainee❒ Employee |  |  |
|  |  | ❒ Tradesman❒ Graduate❒ Trainee❒ Employee |  |  |

|  |
| --- |
| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required**

**LOCAL CONTENT (continued)**

* 1. Apprentice Details

|  |  |
| --- | --- |
|  | **Tenderers to state the number, trade type, apprentice name and duration employed by tenderer and/or sub-contractor (tenderer to nominate) and to state if and where they will be utilised in the execution of this scope of works.**  |
| **Employer**(Tenderer or Sub-Contractor) | **Name**(Name of Apprentice) | **Apprentice Contract No.** | **Period of Employment** (How long have they been employed) | **Trade Year**(What year of qualification are they currently in) | **Trade Type** | **Where will they be utilised?** | **Estimated number of days of work** |
|  |  |  |  |  |  |  |  |
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| --- | --- |
|  | **Provide details of the measures utilised to ensure Apprentices are meeting their learning objectives.**  |
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| **RESPONSES TO ASSESSMENT criteria (cont.)** |

**NOTE: Add lines or an attachment if more space is required**

**LOCAL CONTENT (continued)**

* 1. Training and Development

|  |  |
| --- | --- |
|  | **Provide details of accredited training or employment opportunities that are currently supported by the Tenderer or will be generated by this requirement.** |
| **Name of Trainee/Employee** | **Skill/Trade** | **DET ID No**(if applicable) | **IndicateCurrent/Proposed Date** | **Where will they be utilised for this requirement** | **Indigenous employee** |
|  |  |  | Current: | [ ]  |  | Yes/No |
| Proposed Date: |  |
|  |  |  | Current: | [ ]  |  | Yes/No |
| Proposed Date: |  |

|  |  |
| --- | --- |
|  | **Provide details of other training initiatives the Tenderer currently undertakes.** |
| **Name of Training Program/Initiative** | **Skill/Trade** |
|  |  |
|  |  |
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| --- |
| RESPONSES TO ASSESSMENT criteria (cont.) |

**NOTE: Add lines or an attachment if more space is required**

1. CAPACITY
	1. Overview

|  |  |
| --- | --- |
|  | **Provide an overview of key team members nominated for this project and their skills, qualifications and experience that is relevant to this project.*** Include key subcontractors
* Attach CV’s (curriculum vitae’s) for key personnel
* Link to previous projects experience where relevant
 |
| **Name** | **Role On Project** | **Skills / Expertise / Qualifications / Knowledge** |
|  |  |  |
|  |  |  |
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* 1. Organisation, Personnel and Project Delivery Structure

|  |  |
| --- | --- |
|  | **Provide organisation charts that outline Business Organisation Structure, Project Staff and Structure including experience of personnel that will be involved in providing the requirement. Include:*** **Business organisation chart**
* **Project delivery Team Organisation Chart (include DIPL staff and subcontractors)**
* **Overview of specialised skills / qualifications and knowledge of personnel**
* **Contingency personnel (in case of proposed personnel unavailability)**
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| RESPONSES TO ASSESSMENT criteria (cont.) |

**NOTE: Add lines or an attachment if more space is required**

CAPACITY (continued)

* 1. Current Commitments

|  |  |
| --- | --- |
|  | **Provide details of current contractual commitments (add space if necessary).** |
| **Principal Location and Description** | **Contract Award Date** | **Total Value $** | **% Not Completed** | **Due Date for Completion** |
|  |  |  |  |  |
|  |  |  |  |  |
|  | **Provide details of the business’ remaining capacity (after commitments are taken into account).** |
|  |
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| --- | --- |
|  | **Provide details of effect of current contractual commitments on this project.** |
| **Project Location and Description** | **Effect on this project.** |
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| RESPONSES TO ASSESSMENT criteria (cont.) |

**NOTE: Add lines or an attachment if more space is required**

**CAPACITY (Continued)**

* 1. Financial

|  |  |
| --- | --- |
|  | **Details of Tenderer’s processes and procedures to ensure timely payment of employees, sub-contractors and creditors.** |
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* 1. Risk Management Systems

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| --- | --- |
|  | **Details of Performance Management or Quality Management systems and standards implemented by the Tenderer.** |
|  |
|  |
|  |

* 1. Risk Identification and Management / Mitigation

|  | **Identify and detail key risks for this project and detail contingency plans that will be implemented by the Tenderer in delivery of the Works. Consider and address at a minimum safety, traffic management and environmental (including erosion and sediment ) risks.** |
| --- | --- |
| **Risk / Issue** | **Proposed Management / Mitigation** |
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* 1. Legal action that may impact Tenderer

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| --- | --- |
|  | **Detail any legal action pending that may impact the Tenderer’s ability to meet the requirements of the Request for Tender.** |
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|  |

|  |
| --- |
| INDIGENOUS DEVELOPMENT PLAN PROPOSAL |

|  |  |
| --- | --- |
| **1.** | Who is your nominated Indigenous Development Representative? |
| Name |  |
| Position |  | Phone No |  |

|  |  |
| --- | --- |
| **2.** | (a) How will you determine indigenous employment capability and how will you engage with the available indigenous workforce?(b) Provide the name of any specialist organisation you intend to use. |
|  |
|  |

|  |  |
| --- | --- |
| **3.** | (a) What indigenous employment targets will be aimed for on this project?(b) How will the indigenous employment targets be measured?(c) How will the local community be consulted on achieving these targets? |
|  |
|  |

|  |  |
| --- | --- |
| **4.** | (a) What training organisation are you intending to use, and what accredited training courses are you considering?(b) How will you undertake the training needs assessment, and how will this guide the training schedule you develop? (c) What classroom and on-the-job training will be provided? |
|  |
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| --- | --- |
| **5.** | What services, suppliers and sub-contractors will you use on this project, to optimise indigenous employment outcomes and community benefit? |
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|  |

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| --- |
| INDIGENOUS DEVELOPMENT PLAN PROPOSAL (cont.) |

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| --- | --- |
| **6.** | What employment conditions will you use to employ indigenous people? |
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|  |  |
| --- | --- |
| **7.** | Will you be seeking other government funding sources to supplement training costs? |
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| --- | --- |
| **8.** | What reporting arrangements/systems will you use throughout the period of the contract? |
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| PROJECT QUALITY PLAN PROPOSAL |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Do you have a documented quality system? (Tick) |  |  | YES |  |  | NO |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| On which standard is it based? (Tick) |  |  | ISO 9001:2000 |  |  |  |
|  |  |  |  |  |
|  |  |  | Other | Specify: |  |

|  |
| --- |
| Who is your nominated Quality Management Representative (QMR)  |
| Name |  |
| Position |  | Phone No |  |

|  |
| --- |
| How do you intend to meet the requirements for contract review? *(Clause* *7.4.3 of the RFT)* |
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| --- |
| How will you meet the requirements for design control? *(Clause* *7.4.4 of the RFT)* |
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| --- |
| How will you control documents and data relating to the contract? *(Clause* *7.4.5 of the RFT)* |
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| --- |
| PROJECT QUALITY PLAN PROPOSAL (cont). |

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| --- |
| What methods do you propose to employ to meet the requirements for purchasing and sub-contractors? *(Clause* *7.4.6 of the RFT)* |
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| --- |
| What methods do you propose to employ to meet the requirements for material or items supplied by the Principal? *(Clause* *7.4.7 of the RFT)* |
|  |
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| --- |
| How do you identify the work as numbered lots? *(Clause* *7.4.8 of the RFT)* |
|  |
|  |
|  |

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| --- | --- | --- | --- | --- | --- |
| Do you have written procedures which describe how the work will be carried out and controlled? *(Clause* *7.4.9 of the RFT)* |  |  |  |  |  |
|  |  | YES |  | NO |
| If Yes, complete Appendix 1 |  |

|  |
| --- |
| What methods do you propose to employ to meet the requirements for inspection and testing? *(Clause* *7.4.10 of the RFT)* |
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| PROJECT QUALITY PLAN PROPOSAL (cont). |

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| --- |
| How are you going to ensure that any device or equipment used for measuring or testing is accurate to the tolerances specified? *(Clause* *7.4.11 of the RFT)* |
|  |
|  |
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| --- |
| How will you identify and record the results of inspections and tests? *(Clause* *7.4.12 of the RFT)* |
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| --- |
| How will you handle, prevent and remedy defective work or material and defects in your quality system? *(Clause* *7.4.13 of the RFT)* |
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| What action will you take to eliminate or minimise recurring problems? *(Clause* *7.4.14 of the RFT)* |
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| How will you ensure that materials and items to be incorporated in the work are not lost, damaged or suffer deterioration? *(Clause* *7.4.15 of the RFT)* |
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| --- |
| PROJECT QUALITY PLAN PROPOSAL (cont). |

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| --- |
| How will you control quality records? *(Clause* *7.4.16 of the RFT)* |
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|  |

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| --- |
| How will you ensure that all personnel employed on this project are appropriately trained? *(Clause* *7.4.18 of the RFT)* |
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| --- |
| How do you intend to attend to defects during the liability period? *(Clause* *7.4.19 of the RFT)* |
|  |
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| --- |
| Do you have and further relevant details of your proposed quality system? |
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| **PROJECT QUALITY PLAN PROPOSAL**APPENDIX 1 |

LIST OF PROCEDURES ASSOCIATED WITH PROJECT QUALITY SYSTEM

|  |  |  |
| --- | --- | --- |
| **PROCEDURE NO** | **TITLE** | **RELEVANT CLAUSE OF SPEC** |
|  |  |  |
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| ENVIRONMENTAL MANAGEMENT PLAN PROPOSAL |

This Environmental Management Plan Proposal must provide a framework for the Environmental Management Plan required in the Environmental Management section of the specification (RFT)

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| --- | --- | --- |
| Do you have a documented Environmental Management System? | Yes | No |

|  |
| --- |
| On what is the system based? ( For example is it written around the requirements of this RFT?) |
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| --- |
| Who is your nominated Environmental Management Representative? (EMR) |
| Name |
| Position Phone Number |

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| --- |
| How do you intend to ensure that all permits, approvals and clearances are obtained? |
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| How do you intend to meet the requirements of the General Environmental issues? |
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| How will you meet the requirements for Community Consultation? |
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| How will you manage the waste from the project? |
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| --- |
| How will you manage the weeds on the site? |
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| ENVIRONMENTAL MANAGEMENT PLAN PROPOSAL (cont). |

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| --- |
| How will you manage soil erosion on the site? |
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| --- | --- | --- |
| Do you have written procedures that describes how the work will be controlled in regard to Environmental Management? | Yes | No |

|  |
| --- |
| What methods do you propose to employ for internal audits of the system? |
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| --- |
| How will you control Environmental Management records? |
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| How will you ensure that all personnel employed on this project are appropriately trained? |
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| --- |
| Do you have any further relevant details of your proposed Environmental management system? |
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| ENVIRONMENTAL MANAGEMENT PLAN PROPOSAL (cont).APPENDIX 1 |

List of Procedures Associated with the Environmental Management System

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| --- | --- | --- |
| **PROCEDURE No** | **TITLE** | **RELEVANT CLAUSE OF SPEC** |
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| WORK HEALTH AND SAFETY (WHS) MANAGEMENT |

The Tenderer must provide the following information in respect to its Work Health and Safety Management *(refer Work Health and Safety clause in the Conditions of Contract)*

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| --- | --- | --- | --- |
| 1 | Do you have a documented Work Health and Safety Management Plan in place? | YES | NO |

|  |  |
| --- | --- |
| 2 | Who is your nominated Work Health and Safety Management Officer? |
|  | Name |  |
|  | Position |  | Phone No |  |

|  |  |
| --- | --- |
| 3 | What are the key hazards & risks associated with this specific project and what controls will you be putting in place to manage them? |
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