



Subcontractor Approval Form

Please return completed form & provide documents as detailed and return to CLC office or via email to greg@loft-conversions-suffolk-ipswich.co.uk Please read all pages of this document!

This is a non-negotiable requirement prior to commencing any work on or off sites concerning Combination construction Ltd trading as CLC, works at the premises of CLC or using any equipment or vehicles provided by or belonging to CLC If valid documentation is not provided within 48 hours of work commencement, CLC reserves the right to refuse subcontractor work or hire and any payments or verifications associated with such work or hire may be delayed. *=MANDATORY DETAILS

Name/Company Name*			
Trading name (if different)/* Name registered with HMRC			
Address*			
Telephone*	Mobile	*	
E-mail*			
Emergency Contact Name * & Number			
Specific medical details in case of emergency ** ie. medications or allergies			
	with your general application however this could provide in t be able to offer necessary details. Any information you do g emergency.		
Financial Information			
NI No (if sole trader)*			
UTR No* (Please contact us if you do not have this number)			
Bank Name & Address*			
Name on your account*			
Account No*			
Sort Code			
VAT Registration No*			
Company Registration No*			
Registered Office Address			
Type of work undertaken			
No of directly employed staff			
Please sign to accept our terms & conditions, H&S Policy & privacy policy (https://loft-conversions-suffolk-ipswich.co.uk/privacy-policy/)			
Sian:	Date:		

SCAF.00.1 - June 2019 Page **1** of **3**



Complete Loft Conversions 49 Ferguson Way Kesgrave Ipswich Suffolk IP5 2FZ

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Please return/enclose the following documents with this form (tick what you are including) All items must be valid and current and not lapsed or in a period of transition CSCS card scan (jpg or PDF format) Passport/Driving Licence scan (jpg or PDF format) Utility Bill/Address proof of UK residency (PDF format) Copy of Certificate of Insurance/Schedule of Insurance (PDF format) (Renewal/confirmation letters are not accepted. We require you to have liability insurance to work with us)
If a company, please enclose copies of: Health & Safety Policy/Environmental Policy together with examples of training (e.g. CSCS cards) Example of Risk Assessments / CoSHH Assessment Example of Method Statement / Safe system of Work
Invoicing: Please list location of work, days/dates worked, works carried out, measurements/quantities, day rate or price work rate on any invoice submitted. We operate a payment system of 7 days made after receipt of invoice. We require invoices to be submitted weekly. Please submit your invoice each Monday, to be paid typically on a following Friday, ie. a fortnight approximately after invoice being received by us on the Monday. When submitting Dayworks on your invoice, the onus is on you to get these signed off by the Site Manager Invoices submitted after 5pm on a Tuesday will be carried forward a further week. We require original invoices, either on paper, or via Word Document or PDF file, or other computer generated invoicing such as online. No photographs of invoices are accepted. We are unable to accept invoice data written in the body of an email. Invoice payments may be paid by BACS any time up to 5pm/closing of work on an allocated payment day. Your bank may take longer to show cleared transactions in some instances. Materials etc: Please Call CLC for guidelines regarding any materials/expenses claims. Receipts must be provided with any claim. Please Note! We require at least one full weeks' notice for any absence from site or works. This is to enable adequate rescheduling of labour and our fulfilment of contracted works in an agreed timeline. Any unscheduled absence can affect completion of projects and cause a delay in all processes and payments as a consequence. Please contact Gregory Nelson or the office as soon as you know that you will not be attending site on a designated time or date.
Information The Health and Safety at Work Act 1974 Law poster is displayed in the office of CLC Ltd, along with a copy of the Health and Safety Policy, safety rules and company insurance policies. A copy of these Health and Safety rules will be issued to each operative at the start of their employment with the company. By signing this document I acknowledge read and receipt of Health & Safety Procedures and I will abide by the Health and Safety Rules of Complete loft conversions.

SCAF.00.1 - June 2019 Page **2** of **3**



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Print:	
Date:	

SCAF.00.1 - June 2019 Page **3** of **3**