*Appendix A to CRtC Protocol*

**Right to Challenge**

**Expression of Interest form**

The purpose of this form is to assist you in submitting an Expression of Interest (EoI) under Part 5, Chapter 2 of the Localism Act 2011, and relevant Regulations.

You should complete this document in full and provide all relevant documents to support your application. Please see Community Right to Challenge Protocol for further Guidance.

Please return this form to:

Corporate Legal Manager

North Hertfordshire District Council

Council Offices, Gernon Road

Letchworth Garden City

Hertfordshire

SG6 3JF

E-mail: Monitoring.Officer@north-herts.gov.uk

**Please note:**

The Freedom of Information Act 2000 (FOIA) and Environmental Information Regulations (EIR) 2003 apply to North Hertfordshire District Council (‘NHDC’) and therefore information provided by you may have to be disclosed by us in response to a request unless it is decided that a statutory exemption applies.

If the service you have expressed an interest in is currently contracted out to another provider the Council will have to disclose information to relevant parties to enable an accurate Service Specification to be compiled. If this proceeds within the Community Right to Challenge Protocol process, this and associated documents are likely to be shared as part of the consultation process and considered by relevant Members and Officers at NHDC or other relevant authorities, if the service you are interested is currently delivered jointly.

**PART A: About Your Organisation**

This Part A establishes basic facts about you and your organisation.

**Please complete this section for each organisation of your consortium (including any sub contractors) and on a separate page if there is insufficient room.**

**A1.Your Organisation**

|  |  |
| --- | --- |
| **Name of the organisation (“relevant body”[[1]](#footnote-1)) in whose name the EoI is submitted:**  |  |
| **Contact name for enquiries about this EoI:**  |  |
| **Contact position (Job Title):** |  |
| **Address & Post Code (and Registered address if different):**  |  |
| **Telephone number:**  |  |
| **Fax number:**  |  |
| **E-mail address:** |  |
| **Is your organisation:** **(Please tick one)**  | 1. **a voluntary or community body?**
 |  |
| 1. **a body of persons or a trust which is established for charitable purposes only?**
 |  |
| 1. **A Parish or Town Council?**
 |  |
| 1. **Two or more NHDC employees (or former employees of NHDC)?**
 |  |
|  | 1. **A BID (Business Improvement District body)?**
 |  |
| **If your organisation is a registered charity or registered society (co-operative or community benefit society), please provide a valid, current registration number:**  |  |
| **Name of (ultimate) parent company/ group (if applicable):** |  |

**A2. Your Partners**

If you intend working with other organisations to deliver this service please complete the table below, providing details of each organisation, their role in delivering the service and the intended relationship between you (as the Lead Body) and the other organisation(s) listed. You should then provide the full details set out in A1 for all those organisations.

|  |  |  |  |
| --- | --- | --- | --- |
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|  |
| --- |
| **Organisation**  |

 | **Intended role and proportion of the service for which they would be responsible**  | **Relationship to Lead Body** |
|  |  |  |
|  |  |  |
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**PART B: Financial Resources**

The Council will conduct a risk assessment based on your financial standing. At the Council’s discretion we may reject your expression of interest if it is considered that you or one of your partners is not suitable to provide this service. You must provide this information for yourself and for any member organisation of your consortium and/or sub contractors.

|  |  |
| --- | --- |
| **B1** | **This section asks for some financial figures about your organisation (and the ultimate holding company if there is one). Please provide the figures for the two most recent years (if available).** |
| **B1.1** | **Is your organisation a formal legal entity?** | Yes/no |
| **B1.2** | **Please indicate the turnover of the organisation for the past two years.****NB: Charities and Registered Societies should include their reported Income figure** | £ for year ended 20 £ for year ended 20  |
| **B1.3** | **Has your organisation met the terms of its banking facilities and loan agreements (if any) during the past year?** | Yes/no |
| **B1.4** | **If “no”, what were the reasons, and what has been done to put things right?** |  |
| **B1.5** | **Has your organisation met all its obligations to pay its creditors and staff during the past year?** | Yes/no |
| **B1.6** | **If “no”, what were the reasons, and what has been done to put things right?** |  |
| **B1.7** | **What is the name and branch of your bankers (who could provide a reference)?****Name****Branch****Contact details** |  |
| **B1.8** | **If asked, would you be able to provide at least one of the following?** | A copy of your most recent audited accounts (for the last two years if this applies): Yes/ No |
|  |  | A statement of your turnover, profit and loss account and cash flow for the most recent year of trading: Yes/ No |
|  |  | A statement of your cash flow forecast for the current year and a bank letter outlining the current cash and credit position:  Yes/ No |
| **B1.9** | **Please describe here how you, your consortium or sub-contractors forming part of your bid proposal intend to ensure there are sufficient funds to finance relevant service provision within a projected 3 year period.** |  |

**Part C. Your relevant service interest**

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| **C1. The Service:**Please describe here the service you are interested in providing or assisting in providing. Your description should be as clear and detailed as possible. You do not intend to provide the service to/for the whole of the North Hertfordshire District, please give details of the geographical area that it does apply to. |
|  |
| **C2. Your service Proposal:**Please detail here your proposal for providing this service. In particular this should cover outcomes:- |
| *C2a: How your EoI will promote or improve the social, economic or environmental well being of North Hertfordshire and the people living there. The Statutory Guidance gives examples: creating local jobs / improving local skills and volunteering opportunities / or improving environmental conditions. This is not an exhaustive list.* |
|  |
| *C2b: How you will meet the needs of service users. The Statutory Guidance gives an example of a survey of service users* |
|  |
| *C2c: Why you consider that your body, your consortium or sub-contractors forming part of your bid proposal are suitable to provide or assist in providing the relevant service. This could also include:-**- Your relationship with the service currently;* *- Any relevant experience you have appropriate to service provision;**- The key stakeholders/ partners you have identified and how you intend to work with them.**- relevant experience you have; and**- relevant expertise you have;* *If you are unable to demonstrate this now/ or believe this will improve or change by the time of any possible procurement exercise (6-9 month time), please set out exactly how this will change.* |
|  |
| **C3. NHDC Employees or former employees**If your body is made up of NHDC employees or former employees please describe how you will engage other employees who are affected by your EoI. |
|  |

**Declaration**

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| --- |
| 1. I certify that I am authorised to sign on behalf of the relevant body submitting this EoI.
2. I/We certify that the decision to submit an EoI was taken at an official meeting of the relevant body and a copy of the minutes of the meeting at which the decision was taken, signed by the Chair or the Authorised person, is attached to this EoI.
3. I/We certify that the information contained within (and in any documents submitted) in this EoI is true to the best of my/ and our relevant body’s knowledge and belief.
4. I/We acknowledge and accept the FOIA / EIR legal provisions apply to this process and any information supplied. We also accept that this information may be shared with other relevant bodies, Members and Officers as part of this consideration process and / consultation purposes.
5. I/We certify that I/we have not done and undertake that I/we will not at any time offer or agree to pay or paying or giving any sum of money, inducement or valuable consideration directly or indirectly to any person for doing or having done or causing or having caused to be done any act or omission in relation to this EoI.
 |
| **FORM COMPLETED BY** |
| Name: |  |
| Position (Job Title): |  |
| Date: |  |
| Telephone number: |  |
| Signature: |  |
|  | **List enclosures / attachments to this EoI below** |
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1. See Protocol definition under section 3 [↑](#footnote-ref-1)