JACK RICHARDS & SON

SUB CONTRACTOR STANDARD TERMS AND CONDITIONS FOR HAULAGE

Jack Richards and Son Ltd

2 Garrood Drive Industrial Estate

Fakenham

Norfolk

NR21 8NN

Tel 01328 863111

Registered No 1041518

Terms & Conditions

ACCEPTANCE OF WORK

When accepting work from Jack Richards (JR), you will receive a Sub Contractor haulier confirmation sheet, this is auto emailed to the email address as supplied by the Sub Contractor Haulier. The confirmation will include the JR Job Reference Number, Customer Load Reference, from and to locations, dates, times and the agreed rate.

INSURANCE

Jack Richards require a minimum standard RHA Terms & Conditions 2009 for all consignments.

JACK RICHARDS JOB REFERENCE NUMBERS

Your confirmation sheet will include a JR Job Reference number which is unique to the job. This will appear on your Sub Contractor confirmation sheet. The JR Job Reference number MUST appear on any invoice you submit for the delivery. Failure to do so will result in non-payment of invoice.

PROOF OF DELIVERIES

All proof of deliveries (POD/s) must be posted along with invoices to the Accounts Department via the address detailed below in Invoices & Payments.

All POD's must be received within 7 days of the date of delivery max. It is the responsibility of the subcontractor to provide a clear signature/stamp on the POD and a receipt where applicable. Please mark your company name clearly on all paperwork returned. If a POD is not available, you will be required to provide an indemnity letter for the delivery within 14 days of the delivery date. Any costs incurred by JR for the failure of returned POD's within the stated time scale will be passed directly onto the sub-contractor. It is strongly advised to ensure you keep a photocopy of the POD to help with any customer enquiries that may occur. Failure to provide relevant paperwork will result in non-payment of invoices.

INVOICES & PAYMENTS

All received invoices will be payed 60 days from the end of the current month.

All invoices and POD's must be addressed and forwarded to:

Accounts Department Jack Richards and Son Limited 2 Garrood Drive Industrial Estate Fakenham Norfolk NR21 8NN

The invoice must include the JR Job Reference number, load reference, the collection and delivery points and the date of the job. Including all of this information will ensure prompt payment of your invoice. Failure to provide the above information on your invoices will result in the invoice being returned and delay of payment.

Enquires on statements can be emailed to accounts@jackrichards.co.uk

SUB-CONTRACTORS RESPONSIBILITY

It is the responsibility of the individual driver to check their load on collection. This includes the number of pallets/cases collected and the overall state of the load. Any discrepancies with the load must be reported whilst still in the collection premises, logged on the collection notes and signed by the person loading the vehicle or a representative of the customer. Any discrepancies that are not reported in this way are the responsibility of the driver and their company. Under NO circumstances can any sub-contractor further sub-contract our work without prior permission from JR.

RETURNS AND SHORTAGES PROCEDURE

If your driver has goods that are being refused or has a shortage from the delivery point, you must contact 01945 588581 whilst the driver is still on site to report all details of the discrepancy. At this point you will be advised if you will be required to hold the driver at the delivery point. Failure to comply with this requirement will result in your company being charged for any cost incurred by JR as a result.

The information we will require is:

- JR Job Number.
- POD / Consignment number.
- Delivery Point.
- Number of cases/pallets being refused/short.
- Product Code.
- Reason for discrepancy.

At this point there are three scenarios:

- Goods are accepted by delivery point after discussion by Jack Richards customer, therefore, no goods returned.
- Goods are refused and customer is aware.
- A shortage reference will be issued This must be written clearly on the POD by the driver whilst still at the delivery point location.
- All goods must be returned to a JR depot within 48 hours of refusal and a signed proof of return obtained.

CONTACT NUMBERS

On completion of all deliveries, all drivers must contact the Sub Contractor Traffic Team 01945 588581 with the delivery information, whilst on site at the delivery point. The information we require is:

- Arrival / Departure time
- Number of pallets delivered and/or cases
- Details on non-conformances (lateness/refusals/shorts)

In the event that you will not achieve the required delivery time, you must inform the Sub Contractor Traffic Team as soon as it becomes apparent. Fakenham 01328 863111, Northwich 01066 351222.

PPE

Minimum PPE requirements for any sub-contractor – to be worn on all customer sites/yards:

- Hi Visibility jacket / vest (YELLOW/ORANGE ONLY) with retro-reflective strip. To be worn when driver exits vehicle.
- Safety footwear Toe Protected boots required. No rigger boots. To be worn when driver exits vehicle.
- Hard Hat with mesh face visor Must be worn on customer sites when handling curtains and securing buckles/straps.
- Safety Glasses Required on several customer site (as per local site rules).
- Long sleeved shirts and long trousers are required on several customer sites.
- Rigger gloves (or equivalent) Required when coupling/uncoupling, handling products & curtain/buckles.

EQUIPMENT

A large percentage of Jack Richards customers are related to the food industry, from packaging to food stuffs. As such we require the following of all vehicles and trailers of which we have subbed work to –

- Free from Contamination and fit to carry food products.
- Free from trace of odour.
- Water tight trailers with no trace of water ingress.

INFORMATION & DOCUMENTS REQUIRED BY JACK RICHARDS

Jack Richards & Son Ltd reserves the right to carry out various reference checks on all Subcontractors in order to confirm their identity of the Subcontractor and the validity of the documents requested and supplied prior to the subcontractor commencing any duties for Jack Richards & Son. As a consequence and to ensure that this application is processed satisfactorily for all parties, it is essential that the person/s completing the supplier information provides all the information requested. In turn Jack Richards & Son Ltd will process the received application in accordance to its General Data Protection Regulation Policy which is accessible via the company website <u>www.jackrichards.co.uk/main/privacy-policy</u>

Please supply the following documents:

- A copy of your goods in transit insurance certificate.
- A copy of your public liability insurance certificate.
- A copy of your employer's liability certificate.
- A copy of your motor fleet insurance certificate.
- A copy of your waste carriers certificate if required for particular loads.
- Please fill in the bank details form (all suppliers are paid by BACS).
- A copy of your Goods Vehicle Operators Licence
- Completed signed and dated supplier information form

Supplier Approval Form

Subcontractors to retain the Terms & Conditions for your records and return the following Supplier Information to <u>operations@jackrichards.co.uk</u> or by Post to: **Operations, Jack Richards & Son Ltd, 2 Garrood Drive, Fakenham, NR21 8NN**

Documents required: (emailing? - attach PDF or TIFF versions only NO PHOTOS)

Forms to Return	Subcontractor Tick to confirm document	JR USE ONLY (Date & sign)
1. Supplier Approval Form, Pg4>6		
2. Contractor health and safety		
questionnaire, Pg 6>7		
3. General Acceptance Certificate		
Signed and Dated Pg8		
4. Good in Transit Certificate		
5. Motor Fleet Insurance Certificate		
6. Public Liability Certificate		
7. Employers Liability Certificate		
8. Waste Carriers Licence		
9. O'Licence Certificate(s)		
10. Letter headed paper		

Subcontractor Trading Information

Company Name:				
Contact Name:				
Contact Phone No.	Land line		Mobile	
Contact Email Address:				
Address:		Registered Add	ress (if differe	ent):

Bank Name:						
Sort Code:		Account No.				
Account Name:						
Bank Address:						

Company Registration Num	nber:		
VAT Number:			
Licensing Authority:			
Operator's Licence Number	r:	OCRS Score:	
Category (indicate):	STANDARD NATIONAL	STANDARD INTERNTIONAL	

Referencing Information: We will need information of a recent customer who you have carried out work for who we can contact for a reference for you and the service you provided.

Customer details

Customer Trading Address:	
Email address:	
Contact Name:	Telephone No.

Sole Trader or/and Partnership Identity Check Information:

In completing this next section by providing the information requested along with your signature and date of signing you do hereby give permission to Jack Richards & Son Ltd to carry out an Experian Identity check on yourself as the Sole Trader or as a Partner in the company you represent in this application. Failing to provide the information requested will result in this application being cancelled.

Name:	Date of Birth (dd/mm/yyyy):
Signature:	Date:

Subcontractor Insurance Policy Details

Insurance Details	Employers liability	Public/product liability	Goods in Transit	Motor Fleet
Name and address				
of insurance				
Broker:				
Policy number:				
Expiry date:				
Type of cover & limits:				

Subcontractors' department contacts

Contacts	Name	Position	Telephone #	Email
Traffic:				
Sub-Contractor				
Confirmation:				
Administration /				
POD's:				
Accounts:				
Out of Hours:				

Contractor health, safety & compliance questionnaire

Jack Richards may request further information or documentary evidence in addition to that already mentioned.

This reply shall constitute a declaration of your Company Health and Safety competence and must be signed by an appropriate person within your company.

Contracted Company Name:	
Type of Business:	
Brief Description of work to be carried out:	Transportation of finished goods.
Name of person completing forms:	
Position:	

	Question	Yes	No	Comment
1.	Do you have 5 or more			
	employees?			
2.	Is your H&S policy reviewed			
	regularly?			
3.	Do you have a Senior			Name:
	Manager responsible for			
	Health & Safety?			Position:
				Qualifications:
4.	Are risk assessments of your			
	activities (inc manual			
	handling and COSHH) carried			
_	out and recorded?			
5.	Have Managers and			
	Supervisors received health			
<u> </u>	and safety training?			
6.	Have your employees			
	received H&S information, instruction and training			
	appropriate to the work and			
	equipment they use?			
7.	Is your company a member			Please list:
/.	of any trade associations?			
8.	Do you have a formal system			
	of accident recording of			
	which all employees are			
	aware?			
9.	Have you been subject to			
	any enforcement action by			
	regulatory bodies in the last			
	5 years?			
10.	Are you a member of any			Please list:
	Trade & Safety			
	organisations? I.e. FTA,			
	RHA, FORS?			
11.	If you have had a fatal or			
	major reportable accident			
	within the las 5 years please			
	provide summary of			
	circumstances and results of			
	investigations carried out.			

Recommendation / Comments

GENERAL ACCEPTANCE CERTIFICATE

1.	I acknowledge receipt of a copy of "Sub contractor Terms & Conditions" and agree to ensure that any persons employed or subcontracted by customer sites will observe all the requirements and conditions specified therein.
2.	Further agree that any persons employed or subcontracted by my company at Jack Richards customer sites will abide by any specific local instructions for local hazardous situations/ operations whilst carrying out the work on our behalf.
3.	I will inform my employees and any subcontractors appointed by me of the contents and requirements of this document and make them aware of any hazards of which I have been informed that they may encounter.
4.	I enclose herewith, or have already forwarded, all relevant documentation requested as part of the Contractor Evaluation procedure.
5.	I agree to provide other relevant information on request including:
	Task based risk assessments for any significant risks which will be encountered during the course of the contract.
	Where applicable statutory test certificates for equipment to be used on site.
	Certificates of competency for operators of plant and or vehicles as appropriate.
6.	I Acknowledge I have read fully understand Jack Richards & Son Ltd terms and conditions.
7.	In the event that any relevant changes are made within the next 12 months you will notify us accordingly to enable us to update our records.
8.	I certify that the details given in response to the Contractor Health and Safety Questionnaire are to the best of my knowledge, correct and accurate.
9.	I confirm that our fleet of vehicles and trailers are kept fit and serviceable and all drivers are operating within Drivers Hours rules.

Sub	contractor:	
545	contractor.	

Name:

Signature:

Position:

Date:

Approved by Jack Richards & Son Ltd:

Name:

Position:

Signature:

Date: