



Bulloo
Shire

RESPONDENT'S SUBMISSION FORM

PART 3

Request for Tender (RFT):	Cleaning of Bulloo Shire Council Facilities
Closing Time:	4:00pm on Friday, 27 June 2025
RFT Number:	T2024-2025-112

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1. RESPONDENT'S SUBMISSION FORM

To: The Chief Executive Officer
Bulloo Shire Council
PO Box 46
Thargomindah QLD 4492

PLEASE COMPLETE THIS FORM IN BLOCK LETTERS

FULL NAME/S OF RESPONDENT:	
STREET ADDRESS OF RESPONDENT:	
ABN OF RESPONDENT:	
ACN OF RESPONDENT:	
TELEPHONE NO. OF RESPONDENT:	
FACSIMILE NO. OF RESPONDENT:	
POSTAL ADDRESS OF RESPONDENT: (For service of notices)	
E-MAIL ADDRESS OF RESPONDENT:	
NATURAL PERSON AUTHORISED TO REPRESENT THE RESPONDENT: (If the Respondent is a corporation)	
In response to Expression of Interest T2024-2025-112	
The Respondent agrees to be bound by and comply with the terms and conditions of the Expression of Interest. The consideration specified by the Respondent in the Price Schedule (if any) is indicative only.	

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COMPLETE AND USE THIS EXECUTION CLAUSE IF THE RESPONDENT IS A CORPORATION BUT DOES NOT EXECUTE UNDER A COMMON SEAL:

EXECUTED by)
 ACN)
 by being signed by)
)
 a Director, and)
)
 , a Director/the Secretary in accordance)
 With section 127 of the *Corporations Act*)
 2001 in the presence of:)

.....
 Witness

.....
 Director

.....
 Name of Witness (print)

.....
 Name of Director (print)

.....
 Witness

.....
 Director/Secretary

.....
 Name of Witness (print)

.....
 Name of Director/Secretary (print)

COMPLETE AND USE THIS EXECUTION CLAUSE IF THE RESPONDENT IS A CORPORATION, DOES NOT EXECUTE UNDER A COMMON SEAL AND HAS A SOLE DIRECTOR/SECRETARY:

EXECUTED by)
 ACN)
 by being signed by)
)
 the sole Director/Secretary in accordance)
 with section 127 of the *Corporations Act*)
 2001 in the presence of:)

.....
 Witness

.....
 Sole Director/Secretary

.....
 Name of Witness (print)

.....
 Name of Sole Director/Secretary (print)

COMPLETE AND USE THIS EXECUTION CLAUSE IF THE RESPONDENT IS AN INDIVIDUAL:**SIGNED by:**)

)

.....)

Print Name)

in the presence of:)

.....
Signature.....
Witness.....
Name of Witness (print)**COMPLETE AND USE THIS EXECUTION CLAUSE IF THE RESPONDENT IS A PARTNERSHIP OF INDIVIDUALS (every partner must sign – add more spaces if necessary)****SIGNED by**)

)

.....)

Print Name)

in the presence of:)

.....
Signature.....
Witness.....
Name of Witness (print)**SIGNED by**)

)

.....)

Print Name)

in the presence of:)

.....
Signature.....
Witness.....
Name of Witness (print)

2. CHECKLIST - Mandatory Information

All items in this section must be completed. Where it is necessary to provide additional information, please ensure that all documents are clearly marked with the relevant attachment title to assist the evaluation panel with their assessment. All attachments must be clearly marked with the relevant paragraph number (e.g. **“2.1 – Organisational Profile”**).

All pages within Part 3 must be completed and returned to the Principal as they form part of the Respondent's Submission.

2.1. Organisational Profile

Attach a copy of the organisation's structure and provide background information on the Respondent and label it “2.1 – Organisational Profile” .	“Organisational Profile”	Tick if attached <input type="checkbox"/>
If corporations are involved, attach their current ASIC company extracts search including latest annual return and label it “2.1 – ASIC Company Extracts” .	“ASIC Company Extracts”	Tick if attached <input type="checkbox"/>

2.2. Referees

Attach details of the Respondent's referees, and label it “2.2 – Referees” . The Respondent should give examples of work provided for its referees where possible.	“Referees”	Tick if attached <input type="checkbox"/>
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2.3. Agents

Is the Respondent acting as an agent for another party?	(Circle) Yes / No	
If Yes, attach details (including name and address) of the Respondent's principal and label it “2.3 – Agents” .	“Agents”	Tick if attached <input type="checkbox"/>

2.4. Trusts

Is the Respondent acting as a trustee of a trust?	(Circle) Yes / No	
If Yes, in an attachment labelled “2.4 – Trusts” : (a) give the name of the trust and include a copy of the trust deed (and all related documents); and (b) provide the names and addresses of all beneficiaries of the trust.	“Trusts”	Tick if attached <input type="checkbox"/>

2.5. Subcontractors

Does the Respondent intend to subcontract any of the obligations of the Contractor under the contract?	(Circle) Yes / No	
If Yes, in an attachment labelled "2.5 – Subcontractors" provide details of the subcontractor(s) including: (a) the name, address and the number of people employed; and (b) the obligations that will be subcontracted.	"Subcontractors"	Tick if attached <input type="checkbox"/>

2.6. Conflict of Interest

Will any actual or potential conflict of interest in the performance of the Respondent's obligations under the Contract exist if the Respondent is awarded the Contract, or are any such conflicts of interest likely to arise during the Contract?	(Circle) Yes / No	
If Yes, please supply in an attachment details of any actual or potential conflict of interest and the way in which any conflict will be dealt with and label it "2.6 – Conflict of Interest" .	"Conflict of Interest"	Tick if attached <input type="checkbox"/>

2.7. Financial Position

Is the Respondent presently able to pay all its debts in full as and when they fall due?	(Circle) Yes / No	
Is the Respondent currently engaged in litigation as a result of which it may be liable for \$50,000.00 or more?	(Circle) Yes / No	
If the Respondent is awarded the Contract, will it be able to fulfil the obligations of the Contractor under the Contract from its own resources or from resources readily available to it and remain able to pay all of its debts in full as and when they fall due?	(Circle) Yes / No	
In order to demonstrate the Respondent's financial ability to undertake the Contract, in an attachment labelled "2.7 – Financial Position" include a profit and loss statement and the latest financial return for the Respondent and each of the other proposed contracting entities, together with a list of financial referees from its bank and/or accountant.	"Financial Position"	Tick if attached <input type="checkbox"/>

2.8. Quality Assurance

Does the Respondent have any documented quality assurance or quality assurance systems?	(Circle) Yes / No	
If the Respondent proposes to subcontract, does its subcontractor have a "third party" quality management system in place?	(Circle) Yes / No	
Supply evidence or details of the Respondent's quality assurance position and where relevant of its Respondent's or subcontractor's position, in an attachment labelled "2.8 – Quality Assurance" .	"Quality Assurance"	Tick if attached <input type="checkbox"/>

2.9. Insurance Coverage

Respondents are to supply evidence of their insurance coverage (including copies of certificates of currency) for every type of insurance specified below in an attachment labelled “2.9 – Insurance Coverage”.		“Insurance Coverage”	Tick if attached <input type="checkbox"/>
Type	Value (\$)		
Public Liability			
Product Liability (if applicable)			
Professional Indemnity (if applicable)			
Workers Compensation			

2.10. Goods and Services Tax

Is the Respondent registered or required to be registered under the GST Act?	(Circle) Yes / No
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3. SELECTION CRITERIA

3.1. Compliance Criteria

Please select 'Yes' or 'No' whether the Respondent has complied with the following compliance criteria:

Description of Compliance Criteria	
(a) Compliance with the Specification contained in the Expression of Interest.	Yes / No
(b) Compliance with the conditions of the Expression of Interest.	Yes / No
(c) Compliance with attendance at any mandatory briefing or site inspection.	Yes / No N.A.
(d) Compliance with the Quality Assurance requirement for this Expression of Interest.	Yes / No
(e) Compliance with lodgement of this Respondent's Submission Form by the Closing Time.	Yes / No
(f) If indicative pricing is requested in the Expression of Interest—compliance with and completion of Item 3.3 Price Schedule.	Yes / No N.A.

3.2. Qualitative Criteria

Before responding to the following qualitative criteria, Respondents must note the following:

- All information relevant to the Respondent's answers to each criterion must be contained within its Submission;
- Respondents are to assume that the evaluation panel has no previous knowledge of the Respondent's organisation, its activities or experience;
- Respondents must provide full details for any claims, statements or examples used to address the qualitative criteria; and
- Respondents must address each issue outlined within a qualitative criterion.

<p>A) Relevant Experience</p> <p>Describe the Respondent's experience in completing /supplying requirements similar to the requirements stated in the Specification and Expression of Interest. Respondents must, as a minimum, address the following information in an attachment and label it "3.2 – Relevant Experience":</p> <ul style="list-style-type: none"> (a) Provide details of similar work; and (b) Detail the scope of the Respondent's involvement including details of outcomes; and (c) Provide details of issues that arose during the project and how these were managed; and (d) Demonstrate sound judgement and discretion; and (e) Demonstrate competency and proven track record of achieving outcomes. 	Weighting 40%	
	"Relevant Experience"	Tick if attached <input type="checkbox"/>

<p>B) Respondent's Resources</p> <p>Respondents should demonstrate their ability to supply and sustain the necessary:</p> <ul style="list-style-type: none"> (a) Plant, equipment and materials; (b) Key personnel; <ul style="list-style-type: none"> I. Include their roles in the performance of the Contract; and II. qualifications, with particular emphasis on experience of personnel in projects with a similar requirement; and III. Membership of any professional or business association; and (c) Any contingency measures or back up of resources including personnel (where applicable). <p>Provide this information in an attachment and label it "3.2 – Respondent's Resources".</p>	Weighting 25%	
	"Respondent's Resources"	Tick if attached <input type="checkbox"/>

<p>C) Demonstrated Understanding</p> <p>Respondents should detail the process they intend to use to achieve compliance with the requirements of the Specification, including:</p> <ul style="list-style-type: none"> (a) Training processes (if required); and (b) A demonstrated understanding of the scope of work. <p>Provide this information in an attachment and label it "3.2 – Demonstrated Understanding".</p>	Weighting 25%	
	"Demonstrated Understanding"	Tick if attached <input type="checkbox"/>

D) Local Content Respondents should demonstrate they are a business local to the Bulloo Shire and meet the definition in Council's Procurement Policy. As a minimum, Respondents should highlight their level of commitment to local employment and sourcing of local goods where possible and label it "3.2 – Local Content" .	Weighting 10%	
	"Local Content"	Tick if attached <input type="checkbox"/>

3.3. Price Information

The following price summary is required to be completed by the Respondent to undertake the services of cleaning public conveniences as per the specifications provided:

SUM PER HOUR (EXC GST)	GST	SUM PER HOUR (INC GST)
\$ /hour	\$	\$ /hour

The following price summary is required to be completed by the Respondent to undertake an **additional clean** of a Council Buildings on a time or date specified outside of the specifications provided:

SUM PER ADDITIONAL CLEAN (EXC GST)	GST	SUM PER ADDITIONAL CLEAN (INC GST)
\$ /hour	\$	\$ /hour

**Note: Hours are reduced from 02 August to 31 December 2025 until the Administration Centre Restoration is completed.*