

Nationwide Services Group Limited

Supplier Pre-Qualification Questionnaire - Waste

Author: Chris Hodsman Owner: Chris Martin Reviewer: Paul Smith Approved:	No: NWSD11 Page: 1 of 3	Issue: P Date: 1 st November 2020
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Introduction

Please complete all sections of the PQQ. If you have any questions or require clarification on any areas of the form, please contact the Nationwide Services team on (023) 9260 4351. Please attach all relevant supporting documents to your response, using the continuation sheet on page 2 for any additional information you feel may be useful to support the PQQ.

Company Details

Date PQQ completed:			
Name/Address of Company			
Main telephone no:			
Services offered to NWS:			
Website address:			
Company Registration No:			
No. of years trading as this company:			
Company contacts	Name:	Tel:	Email:
Managing Director:			
Environmental Officer:			
Health & Safety Officer:			
Financial Controller:			

1.0 Compliance

Item No.	Do you have ...?	Yes/No	Reference Number:	Expiry:	Attached Y/N
1.1	A Waste Carriers Licence*				
1.2	A Waste Management Licence*				
1.3	Environmental Permit/Exemption*				
1.4	Electronic Waste Transfer Notes*		n/a	n/a	
1.6	Public Liability Insurance				
1.7	Environmental prosecutions in the last 5 years		n/a	n/a	

2.0 Policies & Accreditations

Item No.	Do you have a current ...?	Yes/No	If YES please attach copy
2.1	Health & Safety Policy		
2.2	Environmental Policy		
2.3	Quality Policy		
2.4	Modern Slavery & Human Trafficking Policy		
2.5	ISO14001 Certification or equivalent		
2.6	ISO9001 Certification or equivalent		

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2.7	ISO18001 Certification or equivalent		
2.8	Accident Investigation Procedures		
2.9	Risk Assessments		
2.10	Accident Reporting Statistics		

* Denotes to be completed by waste management suppliers only

3.0 End Destination*						
Do you tip into your own transfer station?		Yes / No	If Yes what is the Addresses of your sites:			
If no please list your end destination(s), company name/address:						
If using your own transfer station please state below (based on your annual quarterly return) which methods are used:						
Reuse %	Recycling %	EFW (Energy Recovery) %	RDF/ SRF %	Incineration %	Please state other methods Landfill diversion %	Landfill %
Please confirm what waste types are landfilled:						
How do you sort your waste?						
Mechanical means – Trommels/Conveyor picking lines etc. Yes/No (Delete)						
By hand off the floor Yes/No (Delete)						
Can you provide up to date landfill diversion statistics upon request?						Yes/No

Please give any further supporting information you may think relevant here:	
PQQ completed by (Supplier): (please print name)	Date:
	Signed:
Reviewed by (NWS):	Date:

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Approved:

(please print name)

Signed:

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