



For Internal Use

COINS Account Code:

Name of JRL Company		
Ledgers- Please Cross:	Purchase Ledger	Subcontract Ledger

**BUSINESS INFORMATION AS REGISTERED**

NAME OF LEGAL ENTITY:		
TRADING NAME / DIVISION:		
ADDRESS:		
CITY:	COUNTY:	POST CODE:
CONTACT:		EMAIL:
TEL:	MOB:	FAX:

**OTHER INFORMATION**

CURRENCY: [Select from drop down]			
NATURE OF BUSINESS:			
BUSINESS STATUS: [ Select from list]			
Business Size:	Annual Turnover:	Number Of Employees:	
BILLING TYPE:	INVOICE:	SELF BILLING:	
Do you have a VAT Registration number (Yes / No) - Please Cross:		Yes	No
VAT Registration No:	Company Registration No:		
UTR Number:	National Insurance No:		
Do you Use a Factor (Yes / No) Please Cross:		Yes	No
LEGAL NAME OF FACTOR:			
ADDRESS:			
CITY:	COUNTY:	POST CODE:	
CONTACT:		TEL:	
Factor Companies Reg Number:		Factors Account Reference:	
Do you Use a Credit Insurance company (Yes / No) Please Cross:		Yes	No
Name of Credit Insurance Company:			

**BANK INFORMATION**

<b>BANK NAME:</b>			
<b>ADDRESS:</b>			
<b>CITY:</b>		<b>POST CODE:</b>	
<b>SWIFTCODE /BIC:</b>	<b>IBAN:</b>		
<b>SORT CODE:</b>		<b>ACCOUNT NUMBER:</b>	
<b>ACCOUNT NAME:</b>			
<b>EMAIL TO SEND REMITTANCE TO:</b>			
<b>OTHER INFORMATION:</b>			

**SUPPLIER DETAILS - PLEASE PROVIDE A COPY OF THE CERTIFICATES OF ACCREDITATION**

Other Accreditations			
<b>Vendor Assessment Questionnaire (VAQ)</b>	JRL Group Document	Yes	No
<b>Quality</b>	ISO 9001 Certificate or equivalent Quality Management System	Yes	No
<b>Environmental</b>	ISO 14001 Certificate or equivalent Environmental Management Systems	Yes	No
<b>Health &amp; Safety Management System</b>	BS OHSAS 18001 or ISO 45001 Certificate or equivalent Standard for management systems of occupational health and safety (OH&S) Occupational Health & Safety Systems	Yes	No
<b>Information Security and GDPR</b>	ISO 27001 Certificate or equivalent Information Security Management Systems You will need to demonstrate compliance with GDPR	Yes	No
<b>FORS</b>	The Fleet Operator Recognition Scheme (FORS) is a voluntary accreditation scheme for fleet operators	Yes	No
<b>Quality - FPC Certificate (CE Marking)</b>	FPC Certificate (CE Marking)	Yes	No
<b>BIM</b>	BS EN ISO 19650/ UKAS Certificate must evidence compliance with the standards	Yes	No
<b>Company Profile</b>	ISO 50001 Energy management	Yes	No
<b>Company Profile</b>	ISO 20000 Standard for IT service management	Yes	No
<b>Anti-Slavery Statement</b>	Policy Documents	Yes	No
<b>FSC</b>	Forest Stewardship Council(FSC) Sustainable good quality timber materials	Yes	No

**SUBCONTRACTORS DETAILS - CONSTRUCTION INDUSTRY SCHEME - CERTIFICATE DETAILS**

Principal Trade:			
Are you registered with the Revenue	Please Tick:	Yes	No
If Yes please state Tax Type (Cert Type: G, 20% or 30%)			
<p><b>If No has been answered the work must be outside the scope of the Construction Industry Scheme. Provide specific details of the works/services being supplied by the Subcontractor</b></p>			
Details:			
<p>Will any works supplied by the Subcontractor/Supplier fall within the scope of the VAT Construction Reverse charge ?      Yes      No</p> <p>Note: if any services in a supply are subject to the VAT Construction Reverse Charge, all other services supplied will also be subject to it. For example, supply and fix works will be subject to the VAT Construction Reverse Charge because the goods and services are part of one supply For VAT purposes.</p> <p><b>If No has been answered, please provide details why below</b></p>			

**BUSINESS TYPE SOLE TRADER**

Sole Traders 1st Name:	Sole Traders 2nd Name:	Sole Traders Surname:
UTR Number:	National Insurance No:	

**BUSINESS TYPE PARTNERSHIP [PLEASE PROVIDE DETAILS GIVEN TO HMRC]**

NAME OF PARTNERSHIP :		
PARTNERSHIP UTR NUMBER:		
Partners 1st Name:	Partners 2nd Name:	Partners Surname:
Partners UTR Number:	Partners National Insurance No:	

**SUBCONTRACTORS DETAILS - PLEASE PROVIDE A COPY OF THE CERTIFICATE/S**

**Note: The JRL Group prefer Subcontractors who have more than 5 employees to be registered with an organisations that are members of Safety Schemes in Procurement (SSIP); if a business has 5 employees or less, they can complete JRL Group Sub-contractor Questionnaire and provide our Group Health & Safety Department with supporting document and substantiation of your answers/statements.**

Details of Insurances: <b>Please provide the copy of insurance/Certificate/s</b>		
	Insurer	Copy Attached
Employers Liability	Please Provide the Copy Of Insurance	Yes      No
Public Liability	Please Provide the Copy Of Insurance Minimum Requirement £5,000,000 any one occurrence (Below £1 million turnover) Minimum Requirement £10,000,000 any one occurrence (Over £1 million turnover)	Yes      No
Product Liability	Please Provide the Copy Of Insurance	Yes      No
Professional Indemnity	Please Provide the Copy Of Insurance	Yes      No
Health and Safety	Certificate of accreditation from a member of the Safety Schemes in Procurement (SSIP) [CHAS, SMAS, Achilles, Alcumus Safecontractor etc]	Yes      No
Sub-Contractor Questionnaire	JRL Group Document Health and Safety - Assessment TO BE COMPLETE IF NO H&S ACCREDITATION	Yes      No

Self-Billing Agreement	JRL Group Document	Yes	No
Company Profile	Construction Line/Or Builders Profile	Yes	No

**BUSINESS INFORMATION AS REGISTERED**

**NAME OF LEGAL ENTITY:**

**TRADING AGREEMENT WITH: JRL GROUP LIMITED and SUBSIDIARIES IDENTIFIED BELOW:**

JRL Group Ltd	JRL Civil Engineering Ltd	Ark Mechanical & Electrical Services Ltd
J Reddington Ltd	London Concrete Pumping Ltd	London Tower Crane Hire & sales Ltd
Midgard Ltd	JRL Plant and Logistics Ltd	JRL Construction Management Ltd
Midgard City Ltd	Thames Reinforcements Ltd	JRL Fabrications FZ-LLC
JRL Drylining Ltd	Trent Precast Concrete Ltd	Midgard Design Services Spain SL
Slipstructures Ltd	McMullen Facades Ltd	Amca Structures Ltd
JRL Demolition Ltd	JRL Environmental Ltd	Midgard Design India Private Ltd
JRL Structures Limited	Midgard Design Services Ltd	Stanborough Leisure Limited
Stair Master Ltd	Woodland Environmental Ltd	
Quantum Gate Ltd	Midgard Public Sector Ltd	
JRL Access Ltd	JRL Modular Ltd	
JRL GH Facades Ltd	Foras (Sparkle Street) Limited	

This form collects some of your personal data, which is necessary for us to carry out our business processes. We need your consent to hold your data in our files. We may pass your personal data on to third-party service providers contracted to JRL Group in the course of dealing with you. Please tick the box giving your consent for us to hold your data. Our full privacy policy can be viewed at: [www.jrlgroup.co.uk](http://www.jrlgroup.co.uk)

**Please Note :The Box Must be Ticked!**

**Conflict of Interest**

To your knowledge are there any actual or potential Conflict of Interest performing the contractual obligations contemplated. **Please Note: the Box must be Ticked!**

Yes No

As part of this Supplier Process you are required to disclose all and any personal involvement or interest you, a director, officer, owner/shareholders, partners, employee, agent of, consultant, or immediate family have with the JRL Group and its subsidiaries.

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**TERMS OF CREDIT**

CREDIT LIMIT:

Payment Terms: 60 Days End of Month

Supplier Signature: **(Please do not Use Electronic Signatures):** \_\_\_\_\_ Date: \_\_\_\_\_

AGREED WITH: (Print Name)

Payment terms are 60 Days End of month unless specifically agreed in writing by a Company Official authorized to act on behalf JRL GROUP LTD and Subsidiaries.

**FOR INTERNAL USE ONLY**

Subcontract Information - Project Specific Package Information

**Project Number and Name:** \_\_\_\_\_ **Value of Package:** \_\_\_\_\_

REQUESTED BY

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

APPROVAL FOR USE BY

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

APPROVAL FOR USE BY

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_