**CLIMATE RESEARCH STRATEGY for PRIMARY INDUSTRIES;**

**MANAGER APPLICATION**

# Respondent’s details:

Full legal name and postal address:

ACN/ARBN (if applicable):

ABN (if applicable):

# Project Manager (day to day contact):

For all matters relating to this RFQ, the respondent’s Project Manager will be:

Name/position title:

Postal address:

Telephone:

Mobile:

Email:

# Quotation and total costing:

# List below OR if this is presented in a different document, please list the name of the documents presented.

# Proven capacity:

# Statement of skills and experience related to the detail provided in Project Requirements and Project Deliverables section of the RFQ.

# List below OR attach resume detailing equivalent experience with other projects.

# Referees:

|  |  |  |  |
| --- | --- | --- | --- |
| **Referee Name** | **Position/Company** | **Phone No:** | **Email Address** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Insurance:

# Respondents must provide details of the insurance they hold in the table below. If no policy is held for a particular type of insurance write ‘nil’ in the relevant space. If requested, the successful respondent must provide the Agency with evidence of the listed insurances before a contract will be executed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Insurance details**  |  |  |  |
| **Type** | **Insurer** | **Total amount of insurance cover (including details of any limits on a per claim or aggregate basis)** | **Expiry Date of Policy** |
| **Professional Indemnity** |  |  |  |
| **Public Liability** |  |  |  |
| **Property Insurance**  |  |  |  |
| **Workers Compensation** |  |  |  |

# Administrative information:

# Confidentiality of tenderer information

|  |  |
| --- | --- |
| **Provisions considered necessary to be confidential**  | **Reasons for requesting confidentiality** |
|  |  |
|  |  |

# Declaration by respondent:

The Respondent provides this Quotations to provide the Services described in the *Request for Quotation*

## The quotation

The Respondent agrees to enter into a contract to provide the Services in accordance with its Quotation in the form of the Provider Agreement attached to, or provided with, this RFQ which incorporates by reference AgriFutures Australia’s Conditions of Contract.

The Respondent agrees that AgriFutures Australia may accept or decline to accept the Respondent’s Quotation in its discretion. No commitment or contract exists until a contract in the form of the Standard Form Contract is executed by both parties. The Respondent agrees that AgriFutures Australia is not required to enter into any contract in connection with the RFQ.

The Respondent agrees that participation in any stage of the RFQ process is at the Respondent’s sole risk and cost.

## Unpaid employee entitlements

The Respondent warrants that neither it nor its proposed subcontractors (if any) has a judicial decision against it (excluding decisions under appeal) relating to unpaid employee entitlements where the entitlements remain unpaid.

## Conflict of interest

The Respondent agrees to notify AgriFutures Australia immediately if an actual or potential conflict of interest arises.

## Criminal code acknowledgement

The Respondent acknowledges that the giving of false or misleading information to AgriFutures Australia is a serious offence under section 137(1) of the schedule to the *Criminal Code Act 1995 (Cth)*.

## Compliance with Equal Opportunity for Women in the Workplace Act

The Respondent warrants that neither it nor its proposed subcontractors (if any) is currently named as not complying with the *Equal Opportunity for Women in the Workplace Act 1999* (Cth).

**Improper assistance with preparing quotation**

The Respondent warrants that its Quotation has not been prepared with the improper assistance of employees or contractors or former (within the previous twelve months) employees or contractors of the AgriFutures Australia or with improperly obtained information.

|  |  |
| --- | --- |
| ............................................................................ | ............................................................................ |
| Signatory’s printed name: | Signatory’s signature: |
| ............................................................................ | ........................................................................... |
| Signatory’s Position | Date |
| ............................................................................ | ........................................................................... |
| Signatory’s Phone Number | Signatory’s Email Address |
| ........................................................................... | ........................................................................... |
| Witness’s printed name | Witness’s signature |