

Section 12: Tender details

Tender date

Tender expiry

Date work due to start on site

Contract period Weeks/months

Was tender obtained by competition following the code of procedure for single stage selective tendering?

Yes

Please give details

No ►

	Contractor	Tender £
Three lowest tenders	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>

Are there any modifications to the tender? Yes

No

(If you are applying for approval to change - please attach a tender report, 3 competitive tenders and a priced schedule of work, giving full details of any modifications made and the cost implications.)

	£
A Agreed tender after modifications (Should match items 0 in Section 11.)	<input type="text"/>
B Separate contracts/supplies (Loose furniture/fixtures/fittings should match item P in Section 11: Costings not part of the agreed tender at A above).	<input type="text"/>
C Total building costs (A + B)	<input type="text"/>
D Provisional sums	<input type="text"/>
E Contingencies/dayworks	<input type="text"/>
F Contract guarantee bond	<input type="text"/>
G Preliminaries	<input type="text"/>

► (D, E and F are contained within the agreed tender amount at **A**)

Section 13: Financial Liabilities – 100% Figures

	1	2	3	4	5
	Governors' Aided Special Initiatives £	Governors' Non-Aided £	DFC Direct 100% value £	LA £	Total Project Costs (1 to 3) £
A Building work	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B Fluctuations	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C Sub-total (A + B)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D VAT on C	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E Professional fees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F VAT on Professional fees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
G Furniture, fixtures and fittings (including VAT)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
H TOTAL (C to G)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please indicate the source of funding to be used to meet the governors' aided costs only. (Column 1)

Travel Plan £

Named initiatives: please specify £

TOTAL governors' aided expenditure (Should agree with **H** (column 1) above). £

Please give details of funding source for Governors Non-Aided (Column 2)

Please give details of LA liability (Column 4)

Section 13: Financial Liabilities (continued)

VA Grant - spend profile

Indicate below the expected spend profile of governors' aided expenditure (give the month the claim is expected to be paid, not the month the work is carried out).

The total amount shown for each financial year should agree with the approved project phasing.

	2016-17 £	2017-18 £	2018-19 £
April	<input type="text"/>	<input type="text"/>	<input type="text"/>
May	<input type="text"/>	<input type="text"/>	<input type="text"/>
June	<input type="text"/>	<input type="text"/>	<input type="text"/>
July	<input type="text"/>	<input type="text"/>	<input type="text"/>
August	<input type="text"/>	<input type="text"/>	<input type="text"/>
September	<input type="text"/>	<input type="text"/>	<input type="text"/>
October	<input type="text"/>	<input type="text"/>	<input type="text"/>
November	<input type="text"/>	<input type="text"/>	<input type="text"/>
December	<input type="text"/>	<input type="text"/>	<input type="text"/>
January	<input type="text"/>	<input type="text"/>	<input type="text"/>
February	<input type="text"/>	<input type="text"/>	<input type="text"/>
March	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total phasing of governor's aided expenditure in each financial year

2016-17 £	2017-18 £	2018-19 £	=	Total governors' aided expenditure £
<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>
				(To agree with H, column 1 on page 8)

Section 14: Professional fees and expenses

	A	VAT	A
	£	£	as % of building cost
A Architect	<input type="text"/>	<input type="text"/>	<input type="text"/>
B Quantity surveyor	<input type="text"/>	<input type="text"/>	<input type="text"/>
C Planning Supervisor	<input type="text"/>	<input type="text"/>	<input type="text"/>
D Services engineer(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>
E Structural engineer	<input type="text"/>	<input type="text"/>	<input type="text"/>
F Other (Please specify) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
G Travel and other expenses	<input type="text"/>	<input type="text"/>	<input type="text"/>
H Site investigation	<input type="text"/>	<input type="text"/>	<input type="text"/>
I Subtotal (A to H)	<input type="text"/>	<input type="text"/>	<input type="text"/>
J Insurances (Specify type) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
K Building regulations	<input type="text"/>	<input type="text"/>	<input type="text"/>
L Planning	<input type="text"/>	<input type="text"/>	<input type="text"/>
M Statutory fees (Please specify) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL (I to M)	<input type="text"/>	<input type="text"/>	

(Transfer totals to column 4, lines E and F of **Section 13**)

Section 16: Certification

The governing body is reminded of their responsibility to appoint, where appropriate, a consultant who holds Professional Indemnity Insurance. If the governing body do not appoint a consultant, they (or their authorised representatives (diocese) must also sign the governing body's consultant declaration at A below.

I/We certify that this form is correct and that the project will comply with all relevant statutory requirements including those listed below:

- Education (School Premises) regulations 1999;
 - The Workplace (Health, Safety and Welfare) Regulations 1992;
 - The Construction (Design and Management) Regulations 1994;
 - Building Regulations 2000 (SI 2000/2531) as amended;
 - Disability Discrimination Act 1995 Parts 3 and 4: as amended by The Special Educational Needs and Disability Act 2001;
 - Diocesan Board of Education Measures 1991 (Church of England Schools only).
- Where the cost of work exceeds the current OJEU threshold we confirm we have followed the EU procurement rules.

- Where the cost of services exceeds the current OJEU threshold we confirm we have followed the EU procurement rules.
- That professional fees do not exceed 15% of the governors aided building work costs.

A. Consultant or Chair of governing body (where a consultant has not been appointed)

Name (CAPITALS please)	Signed	Date
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
Position	Telephone Number	Fax Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of firm	Email address	
<input type="text"/>	<input type="text"/>	

B. School governing body

- We have agreed the project with the Local Authority for their financial liability.

A completed copy of this form was forwarded to (Name of LA recipient)
 on (date)

- The work is necessary and forms part of the school buildings.
- The premises are not due to be replaced, made surplus, abandoned or closed.

Name (CAPITALS please)	Signed	Date
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
Position	Telephone Number	Fax Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Project contact if different from above		
Name (CAPITALS please)		
<input type="text"/>		

Section 17: Project information checklist

To enable professional scrutiny of this proposal and confirmation of correct apportionment of liabilities, please tick the relevant boxes to confirm that the following additional information has been provided with this form

Project type

**Cat
2**

A Existing site plan

B Proposed site plan

C Existing building plan (1:100 primary, 1:200 secondary)

D Proposed building plan

E Elevations (if appropriate)

F Sections (if appropriate)

G Priced schedule of work or cost estimate; elemental cost breakdown

H An itemised list of expenditure (including all fixtures and fittings)

I Tender report (Approval to change only)

Please return this form to:

Manchester Diocesan Board of Education
4th Floor
Church House
90 Deansgate
Manchester
M3 2GH

**MANCHESTER DIOCESAN BOARD OF EDUCATION
10% FUNDING FOR CAPITAL WORK**

To be submitted to Diocesan Board of Education with LCVAP bid form and DFC approval

BLOCK CAPITALS PLEASE

School name: _____

Address: _____

_____ Post Code _____

LEA: _____ Maintenance Account ref no: _____

Project Description: _____

Total cost of Project £ _____ Governors 10% _____

The above 10% will be funded by:	£
1. CMS Interest	
2. School Delegated Budget	
3. Governors Fund	
4. Trust Fund	
5. Other – Please specify	
The 10% cannot be completely funded by the Governors and will require financial assistance from the Board of Education of at least	Grant Loan

Signed Governor _____ Date _____

Governor _____ Date _____

(2 signatures are required)