

## QUALIS PROPERTY SOLUTIONS SUPPLIER PRE-QUALIFICATION FORM

Section 1 Company	
Company Name:	
Company Registration	
Registered Office:	
Director Name:	
Contact Details:	
Tel:	
Email:	
Section 3 Insurances	
	Please provide the level (£)
	covered below:
Employers Liability Insurance:	
Professional Indemnity:	
Public Liability Insurance:	
Section 4 Health & Safety	
Do you have any of the	Please state relevant
following health & safety	accreditations
accreditation?	

• CHAS	
<ul> <li>Safety Schemes in Procure (SSIP)</li> </ul>	
• ISO 45001	
Section 5 Experience	
Please provide a brief	
overview of your company's	
capability and current clients?	

Please complete and return your form to procurement@qualispropertysolutions.co.uk