

Application to receive tenders – short-term contracts

Please note that only those operators who have been accepted on to our tendered Framework Agreements can generally operate passenger transport services for Leicestershire County Council. If you have already been accepted onto one of these Frameworks (bus or taxi) you do not need to fill in this form. However, we also tender separately for local bus services, emergency and/or short term bus and taxi contracts to other operators. This form should be completed by bus and taxi operators who are interested in tendering for those types of passenger transport services provided by authority. Please note that the Authority will seek to reassure itself that potential contractors can meet our specified standards before any contracts are offered. Please ensure that the banking details form (attached at the end of this form) is completed. We are now unable to set you up as an operator without this information.

Operator Details

Please use BLOCK CAPITALS to complete the sections below, the fields marked ★ are mandatory.

Company name ★

Contact person ★

Position in company ★

Address ★ Postcode: ★

Office Phone number(s) ★

Mobile phone no. Fax

Email address ★

Please note that many of our communications and tenders are sent by email so please provide an email address.

Type of Licence(s) held

1. Which of the following licence(s) do you currently operate under (tick all that apply):

PSV International/Standard “O” licence	<input type="checkbox"/>	PSV Restricted “O” licence	<input type="checkbox"/>
Taxi Private Hire Operator	<input type="checkbox"/>	Taxi Hackney owner/driver	<input type="checkbox"/>
Section 19 / 22 Operator	<input type="checkbox"/>		

Licence number(s): Licensing Authority

Tender areas and types

2. Please indicate below the areas in which you are interested in tendering for (NB – we may also send you tender details of services in other areas). Tick all that are appropriate (see the enclosed map for approximate area and further details):

- 1. Leicester and area
- 2. Charnwood area
- 3. Melton and area
- 4. Market Harborough and area
- 5. Blaby & Lutterworth area
- 6. Hinckley and Bosworth area
- 7. North West Leicestershire area

3. Which service types are you interested in tendering for (tick all that apply)?

- Local bus services
(usually requires PSV licence)
- Mainstream home to school or other bus-type contracts
(usually requires PSV licence) See Note 1 below
- Escorted taxi-type services
- Non-escorted taxi-type services
- Community Transport services

Note 1: Please note that only those operators who have been accepted on to our tendered Framework Agreement can operate these services. However, we may occasionally also tender emergency contracts to other operators.

4. Do you operate any accessible (wheelchair compliant) vehicles (tick **ALL** that apply)?

Taxi (1-8 Seats) Minibus (9-16 seats) Bus (17+seats)

5. Please tick the relevant box for each type of vehicle that you operate (number of passenger seats excluding driver), tick all that are appropriate if you have one or more of each vehicle type:

Up to 4 passenger seats 5-8 9-16 17-33

34-57 single deck 57+ single deck double deck

Please complete this form and return to the following address:

Passenger Transport Services
Transport Operations
Environment & Transport Department
Leicestershire County Council
County Hall
Glenfield
Leicester
LE3 8RJ

OR fax to: 0116 305 7181

OR email to: TO@leics.gov.uk

OR if you have any queries please contact the Transport Operations Service on 0116 305 0002.

If any of these details alter in the future **please inform us at your earliest opportunity.**

You will find a further copy of this and other information on our website at: www.leicestershire.gov.uk in the Roads and Transport area.



The data collected is in accordance with the Data Protection Act 1998. The information supplied will not be passed to any third party and shall only be used for the purposes of providing details of passenger transport services arranged by Leicestershire County Council to operators, service users, schools/other establishments receiving transport.

OFFICE USE: Log Date: Ints:

Passenger Transport Services



Tender areas

The map below shows the tender areas that we have divided the county into. Please note that these are approximate geographic areas and do **NOT** correspond with the district boundaries. We may also send you tender details of services in other areas, especially when near to or across one of the boundaries shown.

We frequently provide transport to and from other locations that are out-of-county, in these cases we will send tenders to those companies that have expressed at interest in the nearest area in Leicestershire. We also welcome applications from companies based in out-of-county locations who are interested in working for Leicestershire County Council.

Area:

1. Leicester and area
2. Charnwood area
3. Melton and area
4. Market Harborough and area
5. Blaby & Lutterworth area
6. Hinckley and Bosworth area
7. North West Leicestershire area



**LEICESTERSHIRE COUNTY COUNCIL
BANK DETAILS FOR DIRECT CREDIT PAYMENTS (BACS)**

Please return this form to: Transport Operations Room 700
Leicestershire County Council
County Hall
Glenfield, Leicestershire
LE3 8RJ

IMPORTANT NOTE: You must attach either a paying-in slip or a redacted copy of your bank account statement to verify the bank account details that you provide below.

Payee Full Name <input style="width: 90%;" type="text"/> Payee Address <input style="width: 90%; height: 100px;" type="text"/> Payee Telephone <input style="width: 90%;" type="text"/>	<p align="center">BANK ACCOUNT DETAILS</p> Name of Bank <input style="width: 90%;" type="text"/> Branch <input style="width: 90%;" type="text"/> Sort Code <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Bank Name <input style="width: 90%;" type="text"/> Account No. <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
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Payee Email

Payee Signature

 Date

IMPORTANT-Please tick one of the following:

I enclose a paying-in slip

I enclose a redacted copy of my bank statement

Complete this section only if applicable

Contact Full Name Company No.
 Position in Company VAT No.

FOR EMSS USE ONLY

Supplier Number

Entered By <input style="width: 150px;" type="text"/>	Date <input style="width: 100px;" type="text"/>
Checked By <input style="width: 150px;" type="text"/>	Date <input style="width: 100px;" type="text"/>