



Biosecurity New Zealand

Ministry for Primary Industries

Manatū Ahu Matua

Mycoplasma bovis
Recovery Advice Service
Application form for suppliers

March 2019

Please email your completed application to MPI: funding@mpi.govt.nz

KO TĀTOU THIS IS US

BIOSECURITY 2025

New Zealand Government

About the applicant



Supplier tips

This section gives MPI basic information about your business and identifies your point of contact for the application process.

If any information is not applicable (for example, you do not have a registered office), please write 'not applicable' in the space provided.

Business profile

Item	Detail
Trading name	
Full legal name (if different)	
Physical address	[If more than one office, give the address of your head office]
Postal address	
Registered office	[If you have a registered office insert the address here]
Business website	
Type of entity (legal status)	[Sole trader / partnership / limited liability company / if other, please specify]
Company registration number	
GST registration number	[Please state if you are based outside New Zealand]
Sectors serviced	[List primary industry sectors serviced e.g Sheep & Beef, dairy, mixed cropping]

Point of contact for the application process

Item	Detail
Contact person	
Position	
Phone number	
Mobile number	
Email address	

Response to the service requirements



Supplier tips

In this section, you are asked to provide your response to the service requirements by demonstrating your organisation's ability to meet the approval criteria and have the required capability and capacity.

You may include any additional information that is not specifically requested if you believe it adds value and is relevant to the service requirements.

Pre-approval conditions



Supplier tips

You must be able to answer 'yes' to each of these questions to be a pre-approved supplier.

You must currently be meeting these conditions. If your business intends to be able to meet them at some time in the future, please complete your answer as 'no'.

#	Condition	Meets
1.	<p>Existing clientele</p> <p>An applicant must either have existing clientele and currently be providing primary industry businesses with a form of advisory or consultancy services relating to <i>M.bovis</i> (as related and listed in the service requirements in the Recovery Advice Payment scheme supplier guide) or have had a previous history of doing so.</p>	[Yes/No]
2.	<p>Provision of existing business services</p> <p>An applicant must provide sufficient information about the business and its services for MPI to be able to assess the suitability of the applicant as an approved supplier for this funding, including the maximum levels of work that it could commit to under this agreement.</p>	[Yes/No]
3.	<p>Suitably qualified and experienced staff</p> <p>An applicant must declare all staff to be used a part of the contract and provide details of their experience and qualifications.</p>	[Yes/No]
4.	<p>Price</p> <p>An applicant must declare its maximum charge out rate to deliver services under this scheme, and include indicative disbursements.</p>	[Yes/No]
5.	<p>Contract terms</p> <p>Applicants must agree with all clauses in full under the draft contract, or indicate any clauses that they would like to negotiate.</p>	[Yes/No]

Questions relating to suitability



Supplier tips

In this section, applicants are asked to provide information on their suitability to provide consultancy and advisory services to primary industries. Answers should be relevant, concise and comprehensive.

If there is a particular service you do not offer and you propose to sub-contract, state this under question 6.

1. About you

Please describe your business, including its background and overall service offering.

List the total number of primary industry businesses/clientele you currently service, and indicate their location.

2. Capability to deliver advisory services

Explain how your business services meet or exceed the service requirements to provide consultancy/ advisory services to primary industry businesses in the regions affected by *M.bovis*. Please attach relevant CVs, details of qualifications, skills, and testimonials.

Detail and list the specific services that you can supply to the primary sector as part of the *M.bovis* recovery.

Describe how you would deliver the service requirements in a timely manner. Include information on your:

- role and responsibilities
- relevant relationships
- facilities and networks.

3. Capacity to deliver

Describe your business size, structure and number of staff, and explain how it is sufficient to deliver the service requirements in full and on time.

Indicate any commitments that may restrict your ability to deliver the service requirements.

Provide information about your operational and financial systems to track and manage delivery. Detail how you propose to manage your client commitments.

4. Key personnel

Provide details of the personnel you intend to use to deliver this contract. (Add additional pages as required.)

Key personnel #1: Proposed project manager for this contract:	
Name	
Qualification/s	
Relevant experience	
Time commitment	[State the proposed amount of time this person will spend in managing delivery of the service requirements.]
Constraints	[State any constraints they have that may affect delivery of this contract.]
Key personnel #2	
Name	
Qualification/s	
Specialisation	[Briefly describe this person's area/s of specialisation. Explain how the specialisation is relevant to the delivery of the service requirements.]
Relevant experience	
Time commitment	[State the proposed amount of time this person will spend in the delivery of the service requirements.]
Constraints	[State any constraints they have that may affect delivery of this contract.]
Key personnel #3	
Name	
Qualification/s	
Specialisation	[Briefly describe this person's area of specialisation. Explain how the specialisation is relevant to the delivery of the service requirements.]
Relevant experience	
Time commitment	[State the proposed amount of time this person will spend in the delivery of the service requirements.]
Constraints:	[State any constraints they have that may affect participating in delivery of this contract.]

5. Proposed sub-contractors

Provide information on any sub-contracting you intend to do to deliver any part of this contract. (Please add additional pages as required.)

Disclosure	[Please indicate if you intend to sub-contract any person or other organisation to deliver any part of the service requirements. If so, please provide details for each sub-contractor.]
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Sub-contractor #1

Sub-contractor's name	
Address	
Specialisation	
This sub-contractor's deliverables	
Relevant experience	
Time commitment	[State the proposed amount of time this sub-contractor will spend in the delivery of the service requirements.]
Constraints	[State any constraints this sub-contractor has that may affect delivery.]

Sub-contractor #2

Sub-contractor's name:	
Address:	
Specialisation:	
This sub-contractor's deliverables:	
Relevant experience:	
Time commitment:	[State the proposed amount of time this person will spend in the delivery of the service requirements.]
Constraints:	[State any constraints the person has in participating in delivery.]

Proposed contract



Supplier tips

The *M. bovis* Recovery Advice Service supplier guide contained a web link to download a copy of the proposed contract. This section confirms that you are prepared to do business on the basis of the proposed contract.

If you wish to alter or negotiate any aspect of the proposed contract, it is helpful for MPI to understand why these arrangements are important to you.

MPI is not required to negotiate any aspect of the proposed contract.

Choose one or the other by ticking the appropriate box

Having read and understood the proposed contract, I confirm that these terms and conditions are acceptable. If successful, I agree to sign a contract based on the proposed contract.

OR

Having read and understood the proposed contract, I request the following alterations. If successful, I agree to sign a contract based on the proposed contract subject to negotiating the following clauses.

Clause	Concern	Proposed solution
[insert clause number]	[briefly describe your concern about this clause]	[describe your suggested alternative wording for the clause or your solution]
[insert clause number]	[briefly describe your concern about this clause]	[describe your suggested alternative wording for the clause or your solution]

Pricing



Supplier tips

Please consider and state any different rates that may apply. For example, different rates for specific services, staff due to their levels of experience, inspections, site visits or travel.

Item	Unit price (\$, excl GST)
[State specific service]	
[State specific service]	
[State specific service]	

Other information on pricing

[Please provide any other relevant information on your pricing structure.]

Declaration

Applicant's declaration

Topic	Declaration	Applicant's declaration
Conflict of interest declaration:	The applicant warrants that it has no actual, potential or perceived conflict of interest in submitting this application, or entering into a contract to deliver the service requirements. If a conflict of interest arises at any point during the application or term of the contract, the applicant will advise MPI immediately.	[agree / disagree]

Details of conflict of interest:

[Provide a brief description of any potential conflict of interest and how you propose to manage them.]

DECLARATION

I/we declare that in submitting this application and this declaration that:

- a. the information provided is true, accurate and complete and not misleading in any material respect
- b. I/we have secured all appropriate authorisations to submit this application, to make the statements, and to provide the information in the application, and I/we am/are not aware of any impediments to enter into a contract to deliver the required services
- c. I/we understand that the falsification of information, supplying misleading information or the suppression of material information in this declaration and the application may result in the application being eliminated from the application process and may be grounds for termination of any contract awarded as a result of the application process.

By signing this declaration the signatory below represents, warrants and agrees that he/she has been authorised by the applicant to make this declaration on its/their behalf.

Signature:

Full name:

Title/position:

Business name:

Date: