Expression of Interest

ACM Community Development Society Limited is currently refurbishing Shannon House in the centre of Castleconnell village and once completed, it will be utilised as a community centre and restaurant/café for Castleconnell village and surrounding area. We are looking for expressions of interest from individuals, companies and/or organisations to operate the (fully equipped) restaurant/café.

The completed Expression of Interest Form should be submitted by post to: Ms. Breda Casey, Chairperson, ACM Community Development Society Ltd, 14 - 15 Castle Street, Castleconnell, Co. Limerick or email to info@castleconnell.ie.

The response should be marked as 'Expression of Interest' and received on or before 3rd January 2020.



Pre-qualification Questionnaire (PQQ) for the operation of a Restaurant/Café at Shannon House, Castleconnell, Co. Limerick.

Thank you for your expression of interest for ACM Shannon House Community Centre and Restaurant/Café. In order to proceed to the next stage of the application process, we invite you to complete the questionnaire below.

1 BASIC DETAILS OF YOUR ORGANISATION

1.1	Name of organisation:
1.2	Contact name:
1.3	Contact position (Job Title):
1.3	Main Address for correspondence:
1.4	Talauhana numban
1.4	Telephone number: E-mail address:
1.5	Company website address (if any):
1.7	Company Registration number:
1.8	Is your organisation:
	i) a public limited company?
	ii) a limited company?
	iii) a partnership?
	iv) a sole trader?
	v) a registered charity?
	vii) other (please specify)
1.9	Have you operated a similar business in the past? If so please provide details.

FINANCIAL INFORMATION

2.1	Has your organisation met all its obligations to pay its creditors and staff during the last year? Yes / No	
2.2	If "No" please explain why not:	
2.3	2.3 What is the name and branch of your bankers (who could provide a reference)	
	Bank:	
	Contact Name:	
	Contact details:	
2.4	Most recent 2 years Annual Accounts will be required at the next stage of this process. Please indicate your willingness to provide same if required. Yes / No	
2.5	Do you have an up to date Tax Clearance Certificate Yes / No	

3 BUSINESS ACTIVITIES

3.	.1 What are the main business activities of your organisation?
3.	.2 How many staff does your organisation have?

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4 INSURANCE

4.1 You will be required to submit a copy of your Insurance Policy prior to operating the Cafe. Do you currently have insurance cover? Yes / No		
If yes please provide details of your current insurance cover:		
a) Employers Liability Value €		
b) Public Liability Value €		
	c) Other (please provide details) Value €	

5 QUALITY ASSURANCE

5.1	Do you or your organisation hold a recognised quality management
	Certification? Yes/No
	•
5.2	If Yes please state name of certification:
5.3	If No, do you or your organisation have a quality management system?
	Yes / No
	•
5.4	If you do not have quality certification or a quality management system,
	please explain why.
	picase explain why.

6 PROFESSIONAL AND BUSINESS STANDING

Do any of the following apply to your organisation, or to (any of) the director(s) / partners / proprietor(s)?

6.1 Is in a state of bankruptcy, insolvency, compulsory winding up, receivership, composition with creditors, or subject to relevant proceedings? Yes / No
6.2 Has been convicted of a criminal offence related to business or professional
conduct? Yes / No
6.3 Has committed an act of grave misconduct in the course of business?
Yes / No
6.4 Has not fulfilled obligations related to payment of social security contributions? Yes / No
6.5 Has not fulfilled obligations related to payment of taxes? Yes / No
6.6 Is guilty of serious misrepresentation in supplying information? Yes / No
6.7 Is not in possession of relevant licences or membership of an appropriate
organisation where required by law? Yes / No
6.8 If the answer to any of these questions is "Yes" please give brief details
below.

OUTLINE PROPOSAL

Please provide a proposal of how you could develop the operation or propose ways in which you would engage with the wider community at the venue. This should include details of your target market, the proposed offer, capacity, and opening times. Please also provide details of the operational set-up and resources required to sustain the proposed operation.

Please provide details of your experience in carrying out similar improvement projects and in operating similar businesses.

Please provide any other appropriate information to support your application.

DECLARATION

I declare that to the best of my knowledge the answers submitted in this PQQ are correct. I understand that the information will be used in the evaluation process to assess my organisation's suitability to be invited to tender for the Café.

Approved by:

Name:	
Organisation Name:	
Position (Job Title):	
Date:	
Telephone number:	
Signature:	