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| THIS APPLICATION FORM IS FOR EXPRESSIONS OF INTEREST | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| COMPLETING THIS FORM | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Use this Expression of Interest form if you are interested in being considered for a tender procurement process and submitting a tender for a Trust contract. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EXPRESSION OF INTEREST - APPLICATION QUESTIONS | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Title | |  | | First Name | | | |  | | | Last Name | | |  | | | | | | | | | |  | | |
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| Contact Address Including full Postcode | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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| Telephone Number | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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| Mobile Number | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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| Email Address | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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| Do you have an alternative contact, including agents, you would like us to use? If Yes, provide details. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title |  | | First Name | | | |  | | | | | | Last Name | | | |  | | | | | |  | | | |
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| Relationship to you | | | | |  | | | | | | | | | | | | | | | | | |  | | | |
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| Contact Address  Including full postcode | | | | |  | | | | | | | | | | | | | | | | | |  | | | |
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| Telephone Number | | | | | | | | |  | | | | | | | | | | | | | |  | | | |
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| Mobile Number | | | | | | | | |  | | | | | | | | | | | | | |  | | | |
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| Email Address | | | | | | | | |  | | | | | | | | | | | | | |  | | | |
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| Organisation Name (if applicable) | | | | |  | | | | | | | | | | | | | | | | | | |  | | |
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| Type of Organisation Put the relevant number into this box. See the table below for the key which gives each organisation type a number. If your organisation type is not in this list, write the number 9 and your organisation type in this box. | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
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| 1. Sole Trader 2. Joint Partnership 3. Training establishment | | | | | | 1. Local Authority 2. Public Body 3. Enterprise Company | | | | | | | | | 1. Charity – Public 2. Charity - Private 3. Other | | | | | | | | | | | |
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| Is your organisation a public or private body? Tick only one box. | | | | | | | | | | | | Public body | | | |  | | Private body | |  | | | | |  | |
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| Company Registration Number (if applicable) | | | | | | | | | | | | |  | | | | | | | | | |  | | | |
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| Value Added Tax (VAT) Number (if applicable) | | | | | | | | | | | | |  | | | | | | | | | |  | | | |
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| Contract name State the contract (from Trust’s website) you are interested in. | | | | | |  | | | | | | | | | | | | | | | | | | |  | |
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| Further information Use this section to provide any additional information you would like the Trust to know. | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| WHAT TO DO NOW | | | | | | | | | | | | | | | | | | | | | | | | | |
| Include the title ‘Expression of Interest’ in the subject header if submitting your form by e-mail.  Once we receive your Expression of Interest form we will complete checks to determine if you are potentially eligible to undertake the contract.  Failure to complete this form fully will exclude you from being considered.  Please note, an invitation to join a procurement process and to submit a tender does not mean that you will be awarded the resulting contract. This can only be decided after the tender process has been completed and all tenders and supporting documentation has been appraised.  Sign below once you are satisfied that you have completed the form correctly.  I, as the applicant, declare that I have read and understood the guidance and Expression of Interest form.  I declare that the information given in this Expression of Interest form is true and accurate to the best of my knowledge and belief.  I declare that I have permission from any third party referred to above to include their details herein and to sign the Expression of Interest form on their behalf.  I understand that information given by me will be treated in confidence under data protection and GDPR legislation but may be made available to submitted to government departments, local authorities, the police and the Trust’s funders, for the purposes of assessing my eligibility to undertake the proposed works or of the prevention or detection of crime.  I understand that I may be liable for prosecution if I have knowingly provided information which I know to be false or do not believe to be true. I declare that I have not committed any serious infringement or fraud or committed a similar criminal offence. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Print name of applicant | | | | | | | | | |  | | | | | | | | | | |  | | | | | |
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| Signature of applicant | | | | | | | | | |  | | | | | | | | | | |  | | | | | |
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| Date (DD/MM/YYYY) | | | | | | | | | |  | | | | | | | | | | |  | | | | | |
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| Print name of agent (if included in Q1.8) | | | | | | | | | |  | | | | | | | | | | | |  | | | | |
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| Counter-signature of agent (if included in Q1.8) | | | | | | | | | |  | | | | | | | | | | | |  | | | | |
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| Date (DD/MM/YYYY) | | | | | | | | | |  | | | | | | | | | | | |  | | | | |
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RETURN THIS EXPRESSIONS OF INTEREST FORM TO:

Stratherrick & Foyers Community Trust Limited

The Wildside Centre

Whitebridge

Inverness, IV2 6UN

or email it to [admin@sfctrust.org.uk](mailto:admin@sfctrust.org.uk)