

**Attachment A: Response Form**

**Q2018-35 Supply of Liquor**

# Schedule 1: Business Information

|  |  |  |
| --- | --- | --- |
| **1.1** | **ABN:** |  |
| **1.2** | **Entity Name:** |  |
|  |  | *(registered under the ABN)* |
| **1.3** | **Trading Name:** |  |
|  |  | *(if different from above)* |
| **1.4.** | **Business Address** |  |
|  |  |  |
| **1.5** | **Contact Details** |  |
|  | ***Contact Person:*** |  |
|  | ***Phone:*** |  |
|  | ***Mobile:*** |  |
|  | ***Email:*** |  |
|  | **Signature:** |  |
| **1.6** | **Bank Details for EFT**  |  |
|  | **Bank Account Name:** |  |
|  | **BSB:** |  |
|  | **Account Number:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Yes** | **No** |
| **1.7.1** | **Do you have the required Public Liability insurance coverage?** |  |  |
|  |  |  |  |
| **1.7.2** | **Have you attached a copy of your Certificate of Currency with your submission?** |  |  |
|  |  |  |  |
| **1.7.3** | **If ’NO’, are you prepared to obtain the required insurance coverage prior to contract commencement?** |  |  |
|  |  | **Yes** | **No** |
|  |  |  |  |
| **1.8.1** | **Do you have Workers Compensation insurance?** |  |  |
|  |  |  |  |
| **1.8.2** | **Have you attached a copy of your Certificate of Currency with your submission?** |  |  |
|  |  |  |  |
|  |  |  |  |

# Schedule 2: RFQ Requirements

**2.1 Do you agree to the contract terms and conditions?**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
|  |  |  |

**2.2 Do you agree to supply on account with 30 day payment terms?**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
|  |  |  |

**2.3 Do you hold a current Liquor Licence?**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Yes** | **No** |
|  |  |  |  |

**2.4 Provide Liquor Licence and Licensee details?**

|  |
| --- |
|  |
|  |
|  |
|  |

**2.5 What are your Trading hours?**

|  |
| --- |
|  |
|  |
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**2.6 What are the Delivery hours?**

|  |
| --- |
|  |
|  |

**2.7 What is the lead-time required for orders to be delivered?**

|  |
| --- |
|  |
|  |

**2.8 Advise your returns/breakages policy?**

|  |
| --- |
|  |
|  |

**2.9 Please advise if you are able to supply on Delivery Docket with the Invoice to be sent via email direct to our Accounts Payable?**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
|  |  |  |

**2.10 Please provide contact details of key personnel such as:**

|  |
| --- |
| Account Manager / Primary Contact Person |
| Name |  | Title |  |
| Phone  |  | Facsimile |  |
| Mobile No. |  | Email Address |  |
| Other |
| Name |  | Title |  |
| Phone  |  | Facsimile |  |
| Mobile No. |  | Email Address |  |

# Schedule 3: Pricing Schedule

* 1. **Please complete the pricing schedule below. All pricing provided must be Free into Store (FIS) and GST inclusive.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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| --- | --- | --- | --- | --- |
|  | **Company Name:** |  |   |   |
|  |   |
| **Description** | **UOM /EA** | **Price** | **UOM /Ctn** | **Price** | **Stock Item Y/N** |
|   |   |   |  |   |   |
| **Red Wine** |  |   |  |   |   |
| Penfolds St. Henri Shiraz | 1 |   | 6 |   |   |
| Penfolds Bin 389 Cabernet Shiraz | 1 |   | 6 |   |   |
| Grant Burge Filsell Barossa Old Vine Shiraz | 1 |   | 6 |   |   |
| Mr. Riggs The Gaffer McLaren Vale Shiraz | 1 |   | 6 |   |   |
| St. Hugo Cabernet Sauvignon | 1 |   | 6 |   |   |
| Taltarni Shiraz Mourvedre 2015 750 ml | 1 |   | 6 |   |   |
| Penfolds Koonunga Hill Shiraz Cab 2015 750 ml | 1 |   | 6 |   |   |
| **White Wine** |  |   |  |   |   |
| Brokenwood Cricket Pitch Sauvignon Blanc Semillon | 1 |  | 6 |   |   |
| Pierro LTC Semillon Sauvignon Blanc | 1 |   | 12 |   |   |
| De Bortoli Windy Peak Chardonnay 2016 750 ml | 1 |   | 6 |   |   |
| Tahbilk Marsanne 2016 750 ml | 1 |   | 6 |   |   |
| **Sparkling** |  |   |  |   |   |
| Veuve Moisans Blanc De Blancs Brut NV 750 ml | 1 |   | 6 |   |   |
| Mumm Brut Champagne NV 750 ml | 1 |   | 6 |   |   |
| **Beer** |  |   |  |   |   |
| James Squire One Fifty Lashes Pale Ale | 6 |   | 24 |   |   |
| Cascade Premium Light | 6 |   | 24 |   |   |
| Peroni Nastro Azzuro 345ml | 6 |  | 24 |  |  |
| Birra Moretti 330ml | 6 |   | 24 |   |   |
| Tooheys Extra Dry Stubbies 345 ml | 6 |   | 24 |   |   |
| Heineken Lager 330 ml | 6 |  | 24 |  |  |
| Crown Lager 375ml | 6 |  | 24 |  |  |
| Pure Blonde 355ml | 6 |   | 24 |   |   |
| **Spirits** |  |   |  |   |   |
| Johnnie Walker Black Label Blended Scotch Whisky 700 ml | 1 |   | 12 |   |   |
|   |   |   |  |   |   |
| **Delivery Charges (if not FIS)** |   |   |  | **Cost/ Ctn** |   |
| 30 Frances St, RANDWICK |   |   |  |   |   |
| Prince Henry Centre, LITTLE BAY |   |   |  |   |   |
|  La Perouse Museum, LA PEROUSE |   |   |  |   |   |
|  |  |  |  |  |  |

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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **3.2** | **Any further discounts offered?** | **YES** |  | **NO** |  |
|  | If yes, please provide details |  |  |  |
|  |
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# Schedule 4: Declaration

|  |
| --- |
| **Declaration** |
| I have read and understood the Statement of Business Ethics and agreed to abide by these conditions in all dealings with Council.I also state the information provided in this response is accurate, to the best of my knowledge.*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |