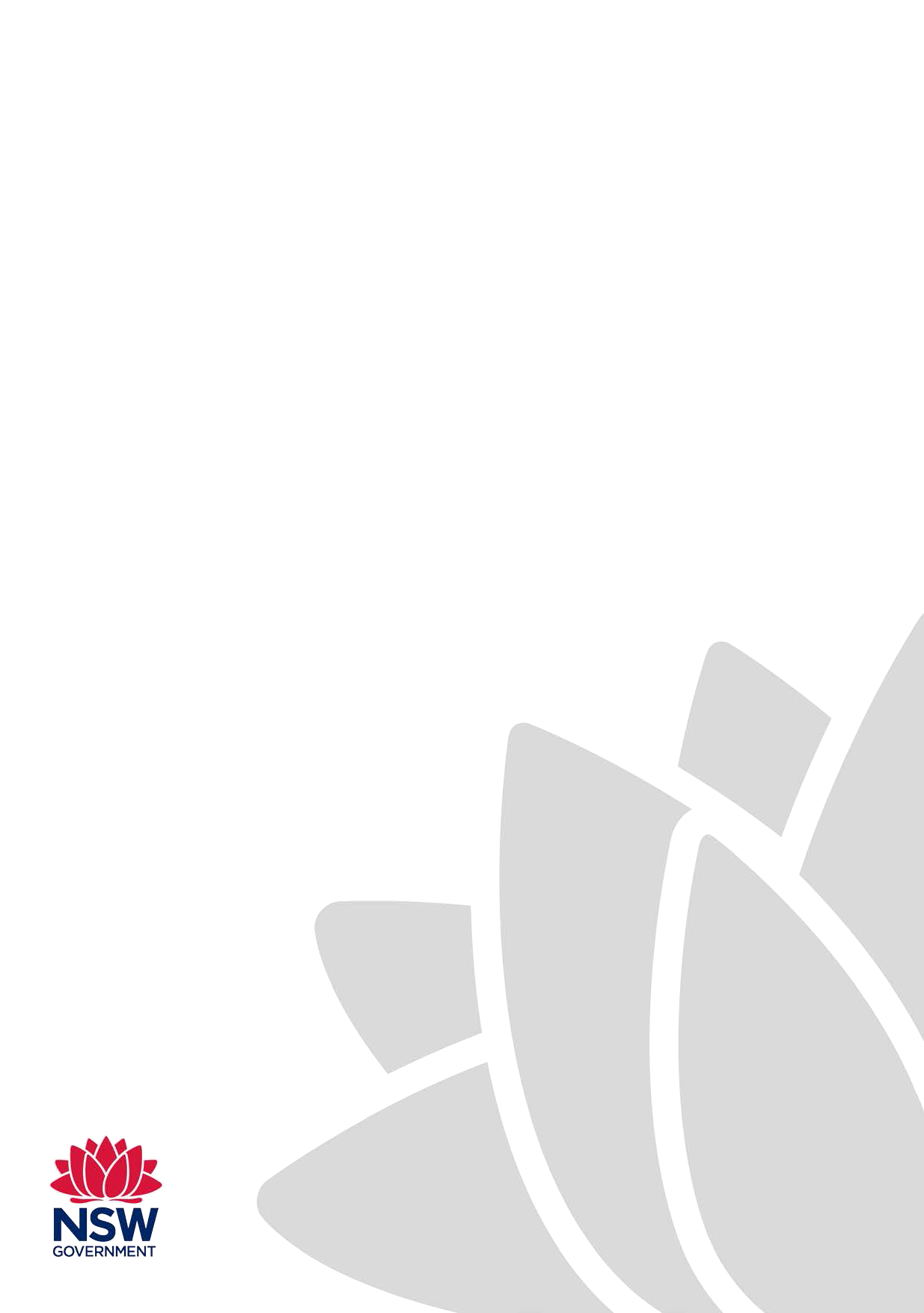
**Prequalification Scheme for Traffic Signal Contractors**

Application Form

Transport for NSW | February 2024

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**PREQUALIFICATION SCHEME FOR TRAFFIC SIGNAL CONTRACTORS  
APPLICATION FORM**

|  |
| --- |
| **Information to Applicants:**   1. *Applicants must read the Traffic Signal Prequalification Scheme Guidelines and Conditions (“Guidelines”) prior to completing this Application Form, which will form the basis of acceptance of this Application.* 2. *Trusts (but not trustees), sole traders and family partnerships are ineligible to apply for registration.* 3. *Applicants must complete all items on this Application Form which are relevant to the Applicant's submission, and attach all the relevant documents requested by Transport for NSW (TfNSW) to this Form. Applicants may submit relevant documentation additional to that requested by TfNSW to support their application.* 4. *Applicants must tick the appropriate box for items where a “Yes/No” option is shown, and mark "NA" (not applicable) for items which are not relevant to the Applicant's submission.* 5. *It would take up to 6 weeks to complete assessment of the Application. Failure to provide the required information will delay processing of the Application and may result in the application being returned to the Applicant for further action.* 6. *Applicants must submit the Application in electronic format (either pdf or MS Word) and not in paper format, but the completed checklists in Attachments A and B must be submitted in MS Word only.* |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | | Business name of Applicant in full (as used on tender submissions): | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 2. | | Applicant's office address in full: | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 3. | | Applicant's postal address for correspondence (if different to item 2): | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 4. | | Applicant's contact person: | | | | | | Designation: | | | | | | | | |
|  | |  | | | | | |  | | | | | | | | |
| 5. | | Telephone no.: | | | | 6. | Facsimile no.: | | | | | | 7. | | Mobile no.: | |
|  | |  | | | |  |  | | | | | |  | |  | |
| 8. | | E-mail address: | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 9. | | Website address: | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 10. | | Company ACN or ABN | | | | | | | | | | | | | | |
|  | | ACN: | | | | | |  | | | ABN: | | | | | |
|  | |  | | | | | |  | | |  | | | | | |
| 11. | | Registered name of Applicant in full (if different to item 1): | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 12. | | Registered address of Applicant in full (if different to item 2): | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 13. | | ATTACH a statutory declaration attesting whether any company director or partner, or a business in which any company director or partner were involved, has ever been declared bankrupt, been wound up leaving unpaid creditors, been involved in a compromise or other arrangement with creditors, or had an administrator appointed. The statutory declaration must be made in accordance with the *Oaths Act 1900* (NSW). | | | | | | | | | | | | | | |
| 14. | | If a company director/partner has been involved in a situation described in Item 13 above, provide details on the extent of indebtedness and the seriousness of the matter, the length of control the person exercised over the organisation concerned and the length of time that has elapsed. | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 15. | | Has the Applicant ever been declared bankrupt, entered into receivership, management agreement scheme or composition pursuant to the Bankruptcy Act or the Corporations Law? | | | | | | | | | | | | | | |
|  | | Yes  No | | | | | | | | | | | | | | |
|  | | If yes, provide details on the extent of indebtedness and the seriousness of the matter, and the length of time which has elapsed since. | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 16. | | Is the Applicant a member of trades, contractors, engineering or other similar associations? | | | | | | | | | | | | | | |
|  | | Yes  No | | | | | | | | | | | | | | |
|  | | If yes, provide details of membership. | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 17. | | Does the Applicant hold a NSW Department of Fair Trading Electrical Contractors Licence? | | | | | | | | | | | | | | |
|  | | Yes  No | | | | | | | | | | | | | | |
|  | | If yes, provide details of the licence, and indicate whether it is individual or corporate. | | | | | | | | | | | | | | |
|  | | Licence no: | | | | Individual | | | Name of Individual or Corporation: | | | | | | | |
|  | |  | | | | **Corporate** | | |  | | | | | | | |
| 18. | | Have any adverse judgements (excluding minor fines or notices) been made against the Applicant for any breaches of or unlawful acts under legislation covering Work Health and Safety, Anti-discrimination, Fair Trading, and Industrial Relations? | | | | | | | | | | | | | | |
|  | | Yes  No | | | | | | | | | | | | | | |
|  | | If yes, state when and the circumstances resulting in the adverse judgements. | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 19. | | How many years experience in electrical installation and associated civil work has the Applicant had? | | | | | | | | | | | | | | |
|  | | As a head contractor: | | | | | |  | | | As a subcontractor: | | | | | |
|  | |  | | | | | |  | | |  | | | | | |
|  | | Outline the type of work undertaken: | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 20. | | ATTACH the following information about current projects, and those completed since the last Application for Prequalification or completed in the past 5 years:   1. name and location of project; 2. description of work, indicate if QA contract; 3. project client; 4. contract value; 5. Superintendent or Client's Engineer, include name and contact telephone; and 6. estimated or actual date of completion. | | | | | | | | | | | | | | |
| 21. | | Has the Applicant, under any business name, ever failed to complete a contract? | | | | | | | | | | | | | | |
|  | | Yes  No | | | | | | | | | | | | | | |
|  | | If yes, name the project, the Principal and state the circumstances. | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 22. | | ATTACH information about the qualifications and technical experience of the Applicant's key personnel (in the form of résumés), including:   1. names of personnel and their professional and technical qualifications; 2. technical capability, experience in the relevant types of work, name and a brief description of projects under which the experience was gained; and 3. present designation and duration in the position. | | | | | | | | | | | | | | |
| 23. | | ATTACH information about the plant/equipment available to the Applicant for contract work including:   1. description of plant item, including model and capacity; 2. quantity on hand; 3. ownership or leasing details; and 4. condition of plant, including year of manufacture. | | | | | | | | | | | | | | |
| 24. | | ATTACH information about the plant/equipment the Applicant proposes to hire or lease for signal works including:   1. description of equipment; 2. hire/lease firm; and 3. whether hire is for equipment only (“dry hire”) or equipment and operator (“wet hire”). | | | | | | | | | | | | | | |
| 25. | | ATTACH information about the type of activities the Applicant proposes to subcontract in relation to traffic signal installation work including:   1. description of activity; and 2. name of proposed subcontractor.   Note: Contractors applying for prequalification must not subcontract the main traffic signal installation activities. Subcontracts must be restricted only to those activities that are ancillary to the main scope of works. | | | | | | | | | | | | | | |
| 26. | | ATTACH information about the Applicant’s experience of working under vehicular and pedestrian traffic, and associated traffic management. | | | | | | | | | | | | | | |
| 27. | | It is a condition of the Prequalification Scheme that prequalified contractors adhere to the NSW Government’s Supplier Code of Conduct.  Indicate below that the Supplier Code of Conduct has been read and understood. | | | | | | | | | | | | | | |
|  | | **Yes  No** | | | | | | | | | | | | | | |
| FINANCIAL INFORMATION TO BE SUBMITTED  *Note: Where the Applicant is a trustee, the financial information is required for both the trust and the trustee.* | | | | | | | | | | | | | | | | |
| **28.** | | ATTACH a statement from the Applicant's bank or other financial institution advising of:   1. branch and account name; 2. overdraft facility; 3. overdraft balance; 4. guarantee facility; 5. guarantees outstanding; and 6. brief details of any other funding facilities available (term loans, commercial bills, or letters of credit). | | | | | | | | | | | | | | |
| **29.** | | ATTACH audited financial statements (including notes) for the last 3 financial years including:   1. trading account; 2. profit and loss; 3. balance sheet; 4. statement of cashflows; 5. signed auditor's report; and 6. signed director's report (where Applicant is a corporation).   Note: If audited statements cannot be provided, ATTACH signed taxation returns for the last 3 financial years together with the unaudited financial statements listed above. If the financial statements provided are more than 6 months old, the latest management accounts (trading account, profit and loss account and balance sheet) must also be provided. If management accounts are not available, the Applicant is to contact the Pre‑Qualifications Lead (see Section 4.1 of Guidelines and Conditions) for advice on the alternative information to be provided. | | | | | | | | | | | | | | |
| **30.** | | ATTACH the Applicant's current year forecast cash flow statements including details of all assumptions used in the preparation of the statements. | | | | | | | | | | | | | | |
| **31.** | | ATTACH details of the Applicant's ageing of debtors receivable and creditors payable:   1. for 30 days and under; 2. for 31 to 90 days; and 3. for over 90 days. | | | | | | | | | | | | | | |
| **32.** | | ATTACH, if applicable, details of any assignment of assets and any charges, both fixed and floating, over the entity's assets if the Applicant is a non-reporting entity (defined in the Australian Society of Certified Practising Accountants Handbook Vol.1 of Accounting Concepts 1 "Definition of the Reporting Entity"). | | | | | | | | | | | | | | |
| **33.** | | ATTACH details of any significant changes in the nature of the Applicant's operations since its last balance date and any recent developments that are expected to substantially affect the operating results of the Applicant for the current financial year. | | | | | | | | | | | | | | |
| QUALITY MANAGEMENT SYSTEM REQUIREMENTS  Applicants are required to complete Attachment A, QMS Q6/Q5 Checklist (appended to this form). The completed checklist/s are to be submitted together with the documents required below.  Other documents to be submitted: | | | | | | | | | | | | | | | | |
| 34. | | A copy of the Quality Manual and a copy of Procedures (including those referred to in the Quality Manual, Inspection Test Plan/s and Records Management Plan) that would normally be applicable to TfNSW projects to provide evidence that a quality management system has been developed. | | | | | | | | | | | | | | |
| 35. | | A copy of a Project Quality Plan from a recent traffic signal project to provide evidence that a quality management system have been developed at the project level. | | | | | | | | | | | | | | |
| 36. | | Copies of two recent internal quality audit reports, copies of a nonconformance register and a corrective action register from a traffic signal project, to provide evidence that the quality management system is being properly implemented at the project level. | | | | | | | | | | | | | | |
| 37. | | A copy of a report from a 2nd or 3rd party quality audit carried out in accordance with AS 3911.1, to provide independent evidence that the quality management system is being properly implemented at the project level. | | | | | | | | | | | | | | |
| 38. | | Copies of minutes of the management reviews of the quality management system from the previous six months to provide evidence of management commitment to the quality management system. | | | | | | | | | | | | | | |
| WORK HEALTH & SAFETY MANAGEMENT SYSTEM REQUIREMENTS | | | | | | | | | | | | | | | | |
|  | | If the WHS management system has been accredited by TfNSW or another organisation, provide details of the organisation and the date of accreditation. | | | | | | | | | | | | | | |
|  | | Organisation: | | | | | | | | | |  | | Date: | | | |
|  | |  | | | | | | | | | |  | |  | | | |
|  | | Applicants are required to complete the relevant Sections of Attachment B, WHS Assessment Checklist (appended to this form). The completed checklist/s are to be submitted together with the documents required below. | | | | | | | | | | | | | | |
| 40. | | Copy of the Applicant’s corporate WHS management system if the Applicant has not been accredited by TfNSW.  Copy of sample WHS Management Plan, and associated safe work method statements (SWMS). | | | | | | | | | | | | | | |
| 41. | | Copies of the following to demonstrate proper implementation of the WHS management system:   1. internal WHS audit reports; 2. 2nd or 3rd party project WHS audit reports; 3. minutes of management reviews of the WHS management system. | | | | | | | | | | | | | | |
| ENVIRONMENTAL MANAGEMENT SYSTEM REQUIREMENTS | | | | | | | | | | | | | | | | |
| 42. | | ATTACH a copy of a sample Environmental Management Plan (EMP) that conforms to TfNSW Specification G36. | | | | | | | | | | | | | | |
| CHECKLIST | | | | | | | | | | | | | | | | |
| 43. | | The documents requested in this Application Form must be attached and labelled (check/ tick if attached) | | | | | | | | | | | | | | |
|  |  | | 13 | Statutory declaration, made in accordance with the *Oaths Act 1900* (NSW) | | | | | | | | | | | | | |
|  |  | | 20 | Current and completed projects | | | | | | | | | | | | | |
|  |  | | 22 | Qualifications and technical experience of key personnel (in the form of résumés) | | | | | | | | | | | | | |
|  |  | | 23 | Available plant and equipment | | | | | | | | | | | | | |
|  |  | | 24 | Plant to be hired or leased | | | | | | | | | | | | | |
|  |  | | 25 | Activities to be subcontracted | | | | | | | | | | | | | |
|  |  | | 26 | Experience of working under vehicular and pedestrian traffic | | | | | | | | | | | | | |
|  |  | | 28 | Bank/financial institution/s statement/s | | | | | | | | | | | | | |
|  |  | | 29 | Audited financial statements, or unaudited statements and signed taxation returns | | | | | | | | | | | | | |
|  |  | | 30 | Current year forecast cashflow | | | | | | | | | | | | | |
|  |  | | 31 | Details of ageing of debtors and creditors | | | | | | | | | | | | | |
|  |  | | 32 | Assignment of assets and charges for non-reporting entities | | | | | | | | | | | | | |
|  |  | | 33 | Changes to Applicant's operations | | | | | | | | | | | | | |
|  |  | |  | Completed QMS Q6/Q5 Checklist | | | | | | | | | | | | | |
|  |  | | 34 | Quality Manual and associated procedures | | | | | | | | | | | | | |
|  |  | | 35 | Project Quality Plan from a recent traffic signal project | | | | | | | | | | | | | |
|  |  | | 36 | Internal quality audit reports, nonconformance register and corrective action register | | | | | | | | | | | | | |
|  |  | | 37 | 2nd or 3rd party quality audit reports | | | | | | | | | | | | | |
|  |  | | 38 | Minutes of management reviews of quality management system | | | | | | | | | | | | | |
|  |  | |  | Completed WHS Assessment Checklist | | | | | | | | | | | | | |
|  |  | | 40 | Corporate WHS management system, sample WHS Management Plan, and SWMS | | | | | | | | | | | | | |
|  |  | | 41 | Internal WHS audit reports, 2nd or 3rd party project WHS audit reports, and minutes of management reviews | | | | | | | | | | | | | |
|  |  | | 42 | Sample EMP | | | | | | | | | | | | | |
| 44. | I have examined the TfNSW Specification TS101 and the associated drawings, and I confirm that my organisation is capable of installing or reconstructing traffic signals in accordance with the requirements of that specification. | | | | | | | | | | | | | | | | |
| 45. | I have read and agree to comply with the current guidelines and conditions for the TfNSW Prequalification Scheme for Traffic Signal Contractors. The information contained in this Application has been checked by me and, to the best of my knowledge, is accurate. I certify that all requested information has been attached to this Application. | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | |  | | | | | |  | |
| Name | | | | | Designation | | | | | Signature | | | | | | Date | |

The application form and supporting information shall either be saved in a USB stick and posted to the address below:

**Tuan Tran**

**Pre-Qualifications Lead**

**Commercial, Performance & Strategy Branch**

**Infrastructure & Place Division**

**Transport for NSW**

**Level 38, 680 George Street**

**Sydney NSW 2000**

or emailed to:

[prequalification.enquiries@transport.nsw.gov.au](mailto:prequalification.enquiries@transport.nsw.gov.au)

Applications cannot be submitted via facsimile.

**ATTACHMENT A  
Assessment of   
Contractor’s Quality Management System   
(ISO 9001:2015 & Q6/Q5)**

Download the QMS Q6/Q5 checklist from <https://www.transport.nsw.gov.au/system/files/media/documents/2023/quality-management-system-evaluation.doc>,  
then complete the QMS Q6/Q5 checklist by filling in only those rows marked “Applicant”, stating the location in the Applicant’s Quality Manual or Project Quality Plan that addresses the question. Do not fill in those rows marked “Assessor”.

For applications for Traffic Signal Prequalification, the applicable Q specification is Q5.

Do not fill in the cover page titled “SUMMARY”, other than the first two rows (for “contractor’s name” and “applicable Q specification”).

Submit the completed QMS Q6/Q5 checklist together with this Application Form in MS Word format, for editing purposes later during assessment.

**ATTACHMENT B  
Work Health and Safety   
Assessment**

Download the WHS assessment checklist from <https://www.transport.nsw.gov.au/system/files/media/documents/2023/contractor-whs-site-specific-plan-assessment.docx>,   
then check against the “Matrix of Applicable Elements” (on page 9 of 9 overleaf) which parts of Section 7 of the checklist, relating to the various site specific hazard management tools (H1 to H11), the Applicant needs to complete.

When completing the WHS assessment checklist, for each question, fill in the document name, clause and page number of the WHS documents in the “Reference Section” column that addresses the question. Do not fill in the “Assessor’s Finding/s” column and do not tick the check box in the checklist. Do not fill in the page titled “WHS Management Plan Assessment - Summary”.

Submit the completed WHS Assessment checklist together with this Application Form in MS Word format, for editing purposes later during assessment.

**Work Health and Safety Assessment**

**Matrix of Applicable Elements**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Assessment Tool**  **Registration Type** | Assessed under Prequalification requirements | WHS Management Plan | (H1) Manual Handling | (H2) Use, Installation, Inspection and Repair of Plant | (H3) Working At Height | (H4) Confined Spaces | (H5) Pedestrian and Vehicular Interaction | (H6) Hazardous Substances and Dangerous Goods | (H7) Electrical Safety | (H8) Traffic Control | (H9) Underground Services | (H10) Overhead Utilities | (H11) Excavation |
| **Prequalification** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| General | 🗸 |  |  |  |  |  |  |  |  |  |  |  |  |
| Category A1 – Asphalt Paving |  | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |  |
| Category TS – Traffic Signal |  | 🗸 |  |  | 🗸 |  | 🗸 |  | 🗸 | 🗸 | 🗸 |  |  |
| Council (RMCC work) |  | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| **Registration** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Category D – Drainage |  | 🗸 | 🗸 | 🗸 |  | 🗸 | 🗸 | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| Category E – Earthworks |  | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Category F – Formwork |  | 🗸 | 🗸 |  | 🗸 |  | 🗸 |  | 🗸 | 🗸 |  | 🗸 |  |
| Category G – Traffic Control |  | 🗸 |  |  |  |  | 🗸 |  |  | 🗸 |  |  |  |
| Category X – Demolition |  | 🗸 | 🗸 | 🗸 | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |  |