INVESTMENT	PARTNER	OUALIF	ΊCΔΤΙΩΝ (OUFSTIONNAIRE

Item	Evaluation	Information Required	Response
SECTI	ON 1.1: RES	PONDENT ORGANISATION INFORMATION	
1.1.1	Information	Name of respondent organisation in whose name the application is submitted:	
1.1.2	Information	Registered Office Address:	
1.1.3	Information	Company Registration Number: (Company Registration Number / I&P number – as appropriate)	
1.1.4	Information	Date of Registration:	
1.1.5	Information	Type of Organisation	A public limited company
			A private limited company
			A Registered Provider of Social Housing If yes, please provide registration number: If yes, provide current Regulatory grading
			Local Authority

			An Arms Length Management Organisation	
			Other Please specify:	
Item	Evaluation	Information Required	Response	
1.1.6	Information	Is your organisation a subsidiary of another organisation?		
		If so, please provide:		
		 Full name and address of the registered office of the immediate parent company 		
		ii) Full name and address of the registered office of the ultimate parent company		
1.1.7	Information	Principal contact for enquiries: (Contact name, title and office address if different to registered address provided at 1.1.2)		
1.1.8	Information	Telephone Number:		
1.1.9	Information	E-mail address:		

Item	Evaluation	Information Required	Response
CONSC	ORTIUM / SPV	/ JV INFORMATION	
1.1.10	Information	Is your application made as a Consortium or SPV / JV?	Yes Please complete questions below No Go to Section 2 on page 7
1.1.11	Information	 i) Full name of participating organisations ii) Position within Consortium/SPV/JV iii) Shareholding membership if SPV/JV If this is not indicated, the GLA will assume that the division is pro rated across the indicated membership) iv) A structure chart/diagram 	
1.1.12	Information	Indicate whether the Consortium members/SPV/JV shareholders noted above have worked together (as a Consortium or SPV) within the last three (3) years (Please include brief details of each Project, relevant dates and value)	Attached? Yes/No Unique reference to supporting information:

1.1.13 Information	Provide a copy of the consortium agreement / memorandum of understanding of the relevant contract or sub-contract arrangements existing at the date of the application between the consortium members in respect of this programme	Attached? Yes/No Unique reference to supporting information:
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	Item	Evaluation	Information Required	Response	
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SECTION 1.2: INFORMATION ABOUT OTHER ORGANISATIONS PARTICIPATING IN A CONSORTIUM OR SPV / JV

This Section is only relevant for each of the participating organisations that are either fulfilling a developing or long term ownership function as follows:

- i) Consortia this Section is to be completed by all Consortium members
- ii) SPVs/JVs this Section should be completed for all shareholders (other than the respondent organisation) within the SPV/JV noted at Item 1.1.11

1.2.1	Information	Name of respondent organisation in whose name the application is submitted:	
1.2.2	Information	Registered Office Address:	
1.2.3	Information	Company Registration Number: (Company Registration Number / I&P number – as appropriate)	
1.2.4	Information	Date of Registration:	

Item	Evaluation	Information Required	Response	
1.2.5	Information	Type of Organisation	A public limited company	
			A private limited company	
			A Registered Provider of Social Housing If yes, please provide registration number:	
			Local Authority	
			An Arms Length Management Organisation	
			Other Please specify:	
1.2.6	Information	Is your organisation a subsidiary of another organisation?		
		If so, please provide:		
		 Full name and address of the registered office of the immediate parent company 		
		ii) Full name and address of the registered office of the ultimate parent company		

Item	Evaluation	Information Required	Response
SECT	ON 2: STATE	MENT OF GOOD STANDING	
2.1	Pass/Query	the following Statement of Good a respondent or participating organization	and all participating organisations listed at Item 1.1.11 are to provide a signed copy of Standing, on its organisation's letterhead, signed by a Director, Partner or equivalent. Where anisation is unable to provide such confirmation, they may supply a qualified confirmation ny mitigating circumstances. Applications involving such qualified confirmations may be 's discretion.

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We confirm that:

- We have full power and authority to enter into an Agreement with the GLA under the Mayor's Housing Covenant 2015-18; and
- Neither the organisation nor its directors are in, or in expectation of, a state of bankruptcy, insolvency, compulsory winding up, administration, receivership, composition with creditors or any analogous state or subject to relevant proceedings or, (if the respondent organisation is a Registered Provider of Social Housing), placed in supervision by the Regulator; and
- Neither the organisation nor its directors have been convicted of a criminal offence relating to business or professional conduct, or are being investigated for, or subject to proceedings that are underway regarding the same, nor have the above committed an act of grave misconduct in the course of business; and
- · We have fulfilled our obligations relating to the payment of social security contributions and taxes; and
- In the last three (3) years, in aggregate, we have not paid, or been required to pay, liquidated damages or general damages under contract or tort, exceeding an amount equal to 5% of the turnover shown in our most recent audited consolidated accounts; and
- Our accounts have not been qualified by auditors in the last three (3) years or, if they have, details are attached, and that there have been no material post balance sheet events. This statement applies to the accounts for the years (please confirm the dates of the accounts to which this statement applies).

Signed:	Dated:
Name:	Position:

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Item	Evaluation	Information Required	Response
2.2	Pass/Query	Indicate whether the respondent organisation or any of the participating organisations have been involved in any of the following and, where applicable, please provide brief details (for consortia please indicate to which organisation the details are relevant) i) court action; and/or	
		ii) Leasehold Valuation Tribunal hearings; and/or	
		iii) Investigations/prosecutions/civil actions for any Health & Safety offences; and/or	
		iv) Housing ombudsman determinations over the last three (3) years?	

NOTES

It is of benefit to the GLA and the applicants that the information provided in this questionnaire is as accurate as possible so as to avoid unnecessary wasted effort at the subsequent stages of the application. The GLA reserves the right to request additional information in relation to applications for Investment Partner status.

By submitting an application for Investment Partner status, Registered Providers will be giving consent that relevant financial information provided to the HCA Regulator may be shared with the GLA on a confidential basis.

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INVESTMENT PARTNER QUALIFICATION QUESTIONNAIRE SECTION 3

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SECTION 3: FINANCIAL AND COMMERCIAL STANDING

Where an applicant has already submitted information to the GLA as part of the standard information template, we do not require this information again. Please indicate in the relevant section, the information previously supplied and to whom.

Please note: The information will need to have been submitted in precisely the form requested and there should have been no changes since submission.

3.1	Information	Name of respondent organisation in whose name the application is submitted	
3.2	Pass/Fail	Please provide a copy of: i) The respondent organisation's consolidated audited	Attached? Yes/No Unique reference to supporting information
		accounts for the previous two years. ii) The respondent organisation's latest management accounts	
		and if applicable:	
		iii) The consolidated accounts for the ultimate parent company for the previous two years.	
		iv) The latest management accounts for the ultimate parent company	
		If your application is made as a Consortium, SPV or JV, please provide the requested information for ALL participating organisations.	

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Item	Evaluation	Information Required R	Response
3.3	Information	S S	Yes Please go to Section 4 No Please complete question 3.4
3.4	Pass/Fail	For each participating organisation fulfilling a developing or long term ownership role, please provide:	
		i) A cashflow including development/capital activity and ongoing trading on a monthly basis for 5 years showing the monthly cash/borrowing balance together with details of any loan facilities	
		ii) For developing organisations only (ie those not retaining ownership) – a development appraisal and cashflow showing the peak funding requirement together with details of funding (general facility or project specific)	
		iii) Forecast Trading account	
		iv) Forecast balance sheet	

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INVESTMENT PARTNER QUALIFICATION QUESTIONNAIRE SECTION 4

Item	Evaluation	Information Required	Response		
SECT	SECTION 4: MANAGING DEVELOPMENT				
The e	For Consortium/ SPV applications, the information may relate to the relevant participating organisation(s), where necessary. The expertise and management arrangements of a partner or developing agent can be used by the applicant to complete this section. In a partner status would then be awarded on the basis of working with the approved partner/contractor/managing agent.				
4. GE	NERAL				
4.1	Information	Name of respondent organisation in whose name the application is submitted.			
4.2	Information	Will the respondent organisation be the developing organisation or will a third party contractor/managing agent be procured to undertake the development? i.e. will the respondent organisation take on responsibility for the development works or will another organisation be responsible.	Respondent is Developing Organisation Go to Question 4.5 Contractor/Managing agent will be appointed Go to Question 4.3		
4.3	Information	Please provide full name and address of appointed contractor(s)/managing agent (if not known as this stage or procurement still on-going, please state not known).			
4.4	Information	If a contractor/managing agent is to be appointed, please briefly outline the arrangements you have undertaken (or will undertake) to choose a Contractor/Developing agent.	Attached? Yes/No/NA Unique reference to supporting information		
4.5	Scored	(Maximum one (1) side of A4) Development Experience Provide details of the capability of the developing organisation or intended partners to deliver the	Attached? Yes/No/NA Unique reference to supporting information		

Item	Evaluation	Information Required	Response
		proposed allocation.	
		If a contractor/managing agent is to be appointed, please draw on their experience to answer this question. If a contractor/managing agent is yet to be appointed, please state that procurement is yet to be completed. For Consortium/SPV applications, the information may relate to the relevant participating organisation(s).	
		The response should include but is not limited to:	
		 Applicant/Contractor/Managing agent history of delivery of affordable housing or comparable development activity; 	
		 Up to three case studies of projects completed in the last three years demonstrating Applicant/ Contractor/Managing agent expertise and track record. Details should include a description of project, size, approximate value, contracting approach/procurement method, whether the project was completed on time and to budget etc.). They should also cover any or all of the following points as relevant: 	
		 Demonstration of how projects have employed Modern Methods of Construction, including Advanced Housing Manufacture or equivalent innovative processes, and Building Information Modelling (BIM). 	
		 Demonstration of how design quality is ensured and managed through project design and 	

Item	Evaluation	Information Required	Response
item	Evaluation	development. Does the Applicant employ a specialist design lead throughout the process? • Demonstration of how previous projects have or would have complied with the London Design Standards Framework: (http://www.london.gov.uk/sites/default/files/FundingStandardsFramework.pdf) • Details of any quality assurance certification or accreditation achieved or currently being sought together with details of any other relevant design or construction awards. (Maximum two (2) sides of A4)	Response
4.6	Scored	Management Experience Provide details of your managerial experience for controlling development work over the last three years or, if you are new to development, how do you propose to do this to deliver the proposed allocation? The response should include but is not limited to: Overview of management arrangements of delivery of affordable housing or comparable development activity;	Attached? Yes/No/NA Unique reference to supporting information

Item	Evaluation	Information Required	Response
		 Roles and responsibilities of individuals/organisations involved; Demonstration that resources are or will be in place to manage delivery of this allocation; Details of mechanisms to be put in place to manage Contractor/Developing agent; Details of any quality assurance certification/accreditation achieved or currently being sought. (Maximum one (1) side of A4) 	
4.7	Scored	Provide details of your approach to risk management for development work or, for smaller providers, arrangements for the delivery of this allocation. Please give case study examples. The response should include but is not limited to: Overview of approach to risk management and/or details of organisation's risk management strategy; Details of processes to identify risks and actions that can be undertaken to mitigate those risks; Details of monitoring arrangements in place to ensure milestones are achieved in line with timescales on approved allocation.	

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Item	Evaluation	Information Required	Response
		(Maximum one (1) side of A4)	

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