APPENDIX B: SUBMISSION DOCUMENTS

Expression of Interest (EOI)

Marapikurrinya Park Food and Beverage Operation

#  B.1 Form in response to the EOI

The Chief Executive Officer

Town of Port Hedland

PO Box 41

Port Hedland WA 6721

I (Registered Entity Name):

(BLOCK LETTERS)

of:

(REGISTERED STREET ADDRESS)

ABN ACN (if any)

Telephone No:

E-mail:

**In response to EOI- Marapikurrinya Park – Food and Beverage Operation***:*

I agree that I have read and understood the conditions contained in this EOI and associated attachments.

I agree that there will be no cost payable by the Town of Port Hedland towards the preparation or submission of this Expression of Interest irrespective of its outcome.

Dated this day of 20

Signature of authorised signatory of Respondent:

Name of authorised signatory:

(BLOCK LETTERS)

Position:

Authorised signatory Postal address:

##

## B.2 Executive Summary

Provide a summary of your business and your response to this EOI

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

## B.3 Mandatory Criteria

|  |  |
| --- | --- |
| Provide copies of relevant food and beverage related licences to support their application. | Yes / No |

## B.4 Compliance Criteria

|  |  |
| --- | --- |
| **Key Compliance Areas** | **Response** |
| **Insurances** Public and Product Liability $20 million | Yes/No |
| **Delivery** Provide details of your earliest commencement date Any other details which may relate to the commencement of these services | Provide date |
| **Exclusions**Are there any special conditions and any exclusions or departures to the License Agreement and this EOI invite | Yes / No  |

## B.5 Key Assessment Criteria

Responses will be assessed based on the following key criteria

|  |  |
| --- | --- |
| **Relevant Experience** Describe your experience in providing food and beverage services, example * Number of years in business
* Type of service offered
* Location/s
* Hours and number of days per week in your current operation (if applicable)
 |  |
| **Resources** Number of staff employed for this business opportunity  |  |
| **Quality** * Examples of your menu
* Details of social media and related advertising or marketing related information
* Any customer related feedback and reviews to support your EOI
 |  |

## B.6 Fees and Charges for this EOI

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Details** | **Unit** | **Range** **(ex GST)** | **GST Component** | **Approximate Price****(inc GST)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |