



# RHA Rescue Agent Questionnaire

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## Section 1

Company Name: \_\_\_\_\_ Ltd/Partnership/Proprietor\*  
RHA Membership Number: \_\_\_\_\_ \*(delete as appropriate)

Company Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code: \_\_\_\_\_  
Telephone No: \_\_\_\_\_  
Fax No: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_

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## Section 2

Please give name(s) of:

Directors: \_\_\_\_\_  
Partners: \_\_\_\_\_  
Proprietor: \_\_\_\_\_

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## Section 3

Principal contacts

Sales: _____	Tel: _____	Email: _____
Control: _____	Tel: _____	Email: _____
Accounts: _____	Tel: _____	Email: _____

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## Section 4

Number of employees: \_\_\_\_\_

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## Section 5

Do you participate in Investors In People?

Yes

No

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## Section 6

Please provide a copy of your current insurance certificate (tick as appropriate):

Motor Insurance

Public Liability (min. £5m)

Employer's Liability

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## Section 7

How long has your company been trading?

\_\_\_\_\_ Years

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## Section 8 - Health and Safety Policy

1. Please provide a copy of your company's Policy Statement of Intent (not entire policy), signed and dated by Director or Partner for

(i) Health and Safety

Yes

No

(ii) Environmental Policy

Yes

No

2. Are all your Operatives and Staff:

(i) trained to industry standards by one of the accredited bodies?

Yes

No

(ii) in the case of Plant Operatives, are they CPCS registered?

Yes

No

3. Has your company been prosecuted or received an Enforcement Notice for breaches of Health, Safety or Environmental legislation in the last three years?

Yes

No

If Yes, please provide information: \_\_\_\_\_

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## Section 9 - Please complete the following table:

Accident Figures for the last three years

Reported under RIDDOR	200-	200-	200-
Fatalities			
Other accidents			

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## Section 10 - Quality Management

1. Do you operate in accordance with the requirements of a documented quality management system?  Yes  No
2. Are you registered by a UKAS-accredited certification body to ISO9001:2000? (If so, please enclose a copy of the certificate, including the scope of registration).  Yes  No
3. Are you registered by a UKAS-accredited certification body to any of the National Highways Sector Schemes?  Yes  No
4. Are you prepared to work to RHA **Rescue**'s quality scheme if you do not have one of your own?  Yes  No
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## Section 11 - E-Commerce

1. Do you have electronic invoicing?  Yes  No
2. Are you able to accept jobs by RAM?  Yes  No
- Mobidem Number: \_\_\_\_\_
3. Do you operate a vehicle tracking system?  Yes  No
- If so, what type? \_\_\_\_\_
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## Section 12 - Financial/credit control

All payments will be made by BACS. Please provide:-

Account Name \_\_\_\_\_

Account Number \_\_\_\_\_

Sort Code \_\_\_\_\_

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## Section 13 - National Trading - What areas can you cover?

1. Do you operate throughout the United Kingdom  Yes  No
- If not, please state which areas you operate in:
- (a) City/Town(s) \_\_\_\_\_
- (b) County(ies) \_\_\_\_\_
- (c) Postal Codes \_\_\_\_\_
- Additional information \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
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## Section 14 - Services and facilities available

Please tick to indicate the services you currently provide, detailing any additional services or information below (sub-contractors will not be accepted).

Service / Facilities available	Yes	No	24 hour?
Car recovery up to 25 T			
Car roadside			
Commercial recovery up to 3.5 T			
Commercial recovery up to 7.5 T			
Commercial recovery up to 18 T			
Commercial recovery up to 44 T			
Commercial roadside assistance			
Motorcycle assistance			
HIAB / Street lifter			
Low loader / transportation - Plant etc.			
Recovery trailer			
Rotator motor crane			
On-site mobile servicing (Car and Commercial)			
Multi-car carrier			
Workshop facilities for emergency repair			
Parts department			
Tyre supply - on site			
Hydraulic pipe services			
Tail lift repairs			
Isuzu dealers			
Airbags			
Customer waiting room			
Refreshments			
Approved IVR training facility			

Additional Information \_\_\_\_\_

\_\_\_\_\_

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