**Community Safety Accreditation Scheme**

**Private Sector Companies, Trusts & Charities**



**Renewal Application**

**Renewal Application Guide**

*Under Section 40 of the Police Reform Act 2002, only chief officers of forces in England and Wales can approve Community Safety Accreditation Schemes (CSAS) in their force area.*

*--------------------------------------------------------------*

*Police CPI Ltd has been nominated by the National Police Chiefs’ Council (NPCC) to undertake the assessment of private sector companies, trusts and charities seeking approval in England and Wales. Police CPI then submit a report and make recommendations as to whether a private sector company, trust or charity meets the requirements of the act.*

***If the structure or ownership of the company has changed since the last submission to Police CPI, a full application will need to be completed. The appropriate form is available from the website (***[***www.policecsas.com***](http://www.policecsas.com) ***) or by request*** [***info@policecsas.com***](mailto:info@policecsas.com) ***.***

***Application Form:***

***Forms A, B & C*** *should be completed in full and signed by the authorised signatory before submission. The authorised signatory should be a director or an employee of the company or organisation that has the authority to sign documents on behalf of the company or organisation and take responsibility for the submission of the application.*

***Form D parts I & II*** *must be completed in full by* ***each*** *of the directors recorded at Companies House and also by the authorised signatory (if not a director). Copies of the photo ID and one other form of ID must be submitted for* ***each*** *director / authorised signatory and have been verified by a director/ manager/company secretary.*

***Supporting Documentation:***

*Please provide copies of the following:*

* *Current Employer & Public Liability Insurance*
* *Latest financial report or statement*
* *Any policies that have materially changed since the last submission*

***How to submit the application:***

*Please forward your completed application and supporting documentation electronically to* [***info@policecsas.com***](mailto:info@policecsas.com)

*Contact us at the same address if you have any questions, would like to speak to someone about the application or are unable to submit the forms electronically and would like an address to mail the application to.*

***Fee and payment:***

***Do not make a payment until the application has been submitted. An invoice will be raised when it is received and will have a 7 day payment request on it.***

*Renewal application*

*£1390.00 + VAT (VAT @ 20% £278.00 – total £1668.00)*

*Payment by BACS (or similar):*

*Bank: Bank of Scotland*

*Account Name: Police Crime Prevention Initiatives*

*Account Number: 06157102*

*Sort Code: 12-11-03*

*Reference: CSAS Renewal (quoting invoice number)*

***Please ensure a remittance is sent to*** [***enquiries@police-cpi.co.uk***](mailto:enquiries@police-cpi.co.uk) ***for the attention of Finance Dept.***

**Data Protection Disclaimer**

In order to progress your application we will require a certain amount of information from you. This will include employee details, contact information, and details about your company / organisation such as policies and procedures. This information will solely be used in order to:

* Identify you as an approved organisation for CSAS
* Make contact with you
* For quality assurance purposes

This information will be held on a police system and will not be shared outside of the police service. The police service includes all police forces in England and Wales and Police CPI Limited for the purposes of confirming your accreditation.

**Please make sure that you have fully completed every section of this application form prior to submission.**

**Form A Employer’s Application Form**

**Renewal for Company / Organisation Approval**

**Details of Company / Organisation:**

|  |
| --- |
| Company Name: |
| Company Registration Number: |
| Registered Office Address: |
| Telephone Number: |
| VAT Registration Number: |

**Authorised Signatory Details:**

|  |
| --- |
| Name of Authorised Signatory: |
| Position Held: |
| Work Contact Address (if not as above): |
| Telephone Number (if not as above): |
| Mobile Number: |
| Email Address: |

Our organisation, meeting the requirements to employ such individuals that fit the criteria as laid down in The Police Reform Act 2002 pursuant of Section 40, wish to declare our intention to apply for Approved Community Support Organisation status.

We agree to meet the standards as laid down by the Chief Officer and will only request accreditation for persons deemed suitable to fulfil the role.

|  |
| --- |
| Signature: Date: |

**Data Protection Act 2018:**

Personal data supplied on this form may be held on, and/or verified by, reference to information already held on computer.

Form B Statement of Compliance

This form must be signed by the Authorised Signatory.

|  |
| --- |
| **Statement of Compliance:**  I have read the Community Safety Accreditation Scheme Private Sector Companies Guidance. I agree to comply with every requirement of these documents.  I acknowledge that failure to comply will result in the company / organisation no longer being accepted and notification will be given to other police forces as appropriate.  I am authorised to sign this document on behalf of the following company or organisation: |

|  |
| --- |
| Company / Organisation: |

|  |
| --- |
| Signature (Authorised Signatory): Date: |

##### **Data Protection Act 2018:**

Personal data supplied on this form may be held on, and/or verified by, reference to information already held on computer.

**Form C Disclaimer**

|  |
| --- |
| I/The Employer acknowledges that neither the Chief Officer nor the Police and Crime Commissioner are responsible for the conduct of the employees of the Employer that the Employer apply to be accredited.  I/The Employer accepts full responsibility for the conduct of their employees and the consequences flowing from their behaviour.  I/The Employer agrees not to enter into any contractual arrangement relating to the performance of any contracts, services etc until the arrangement process and the accreditation process has been completed and the applications have been successful.  I/The Employer agrees to notify the Chief Officer immediately on any matter, which may affect   * the arrangement that the Employer has with the Chief Officer and/or * the accreditation of an individual     The Employer agrees not to hold the Chief Officer or the Police and Crime Commissioner liable for any breach of contract or inability to perform a contract, either in part or in whole, because of the following decisions: -   1. The refusal to enter into an arrangement with the Employer 2. The termination and withdrawal of the arrangement with the Employer 3. The refusal to accredit an existing employee; and/or 4. The refusal to accredit a prospective employee; and /or 5. The refusal to renew an employee’s accreditation 6. The termination and withdrawal of an existing employee accreditation   I/The Employer confirm that a person duly accredited will be informed and will be asked to sign documentation prior to employment/accreditation confirming the following: -   1. that they are not authorised or required by virtue of the accreditation to engage in any conduct otherwise than in the course of their employment by the Employer; and 2. they shall be required to act in accordance with the restrictions contained in their contract of employment and in any event they shall not be permitted to act in contravention of the restrictions contained in the accreditation 3. the accreditation shall cease immediately upon the ending of the contract of employment with the Employer 4. that if they undertake conduct which may have an impact on their being a fit and proper person to be accredited that they shall notify the Employer forthwith 5. that if they cease to be capable of carrying out the community safety functions that they will notify the Employer forthwith 6. that they will co-operate fully with the Employer and the Chief Officer in any investigation relating to the arrangement and the accreditation process |

|  |
| --- |
| Company / Organisation: |

|  |
| --- |
| Signature: Date: |

**Form D Part 1 (complete one for each Director / Signatory)**

**CSAS Company Director Vetting**

**Personal Information**

**Sections that do not apply to you should be clearly marked N/A**

|  |  |
| --- | --- |
| **DATA PROTECTION ACT 1998:**  Other Forces in the United Kingdom may share this data. | |
| **Surname:** | **Forename(s):** |
| **Date of Birth:** | **Place of Birth:** |
| **Title:** | **Previous Name(s):** |
| **Current Address:** | **Telephone/Email:**  **Home:**  **Work (if convenient)*:***  **Mobile:**  **Email:** |

|  |  |
| --- | --- |
| Please give all previous addresses you have lived at over the **last 5 years**. | |
| **Full Address (Include postcode):** | **From (month / year) to (month / year)** |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **4.** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Company Name: | | | Position Held: | |
| **Convictions and Cautions:**  **1.** You must declare if you have ever been investigated, arrested, summonsed, charged, cautioned or convicted for any offence by any UK or non-UK Police Force, law enforcement agency or any other statutory prosecuting authority or agency – this includes, but is not limited to:-  • Traffic offences (including fixed penalty notices but excluding parking)  • Receipt of an absolute / conditional discharge or bindover  • Receipt of a reprimand, warning, final warning or caution as an adult or juvenile  • Being the subject of an Anti-Social Behaviour Order, Football Spectator Banning Order, Risk of Sexual Harm Order, Harassment Order  • Being issued with a Penalty Notice for Disorder or other Fixed Penalty Notice (other than for parking)  **Note: SPENT CONVICTIONS SHOULD NOT BE INCLUDED**  In addition, the following must also be declared;  • Any involvement with the military authorities on disciplinary matters (whether involving court martial or not);  • Involvement in a criminal investigation (whether or not this has led to a prosecution);  • Being subject of ‘Service Confidence’ procedures;  **Do you have any of the above: YES / NO If yes please give details below:** | | | | |
| **Date**  **(most recent first)** | **Offence/Alleged Offence/Investigation** | **Result (If known/Applicable** | | **Court/Police Station/Reason Involved** |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
| **2.** Do you know or associate with any person(s) (excluding registered informants or contacts but ***INCLUDING FAMILY MEMBERS***) whom you know or have reason to believe has criminal convictions or is or has been involved in criminal activities? Are you aware of any other circumstances or characteristics, which may impact upon vetting clearance?  **YES\* / NO**  **If YES, please provide details:**  **3.** Have you ever been involved in any actions that could be described as Politically/Religiously/Racially/Environmentally Disruptive?  **YES\* / NO**  **If YES, please provide details:**  ***\* If applicable, please provide a Certificate of Satisfaction*** | | | | |

|  |
| --- |
| Have you previously been the subject of a vetting procedure?    **YES / NO**  **If Yes, please provide details.** |

|  |
| --- |
| **Proof of your identity is required**.   * Photo ID (passport or photo driving licence – or birth certificate if you do not possess a passport or photo-card driving licence ) * Proof of residence (e.g. utility bill/bank correspondence dated within last 6 months)   **NOTE:** a photo driving licence is NOT acceptable as proof of residence even if dated within the last 6 months  Photocopies of the relevant pages of these documents **must** accompany this form. |

|  |
| --- |
| **Verification by Manager, Director or Company Secretary**  I certify that I have examined the above-mentioned original documents and confirm that they relate to the applicant.  Signature: …………………………………………………….. Date: ………………………………………..  Print Name: ……………………………………………….. Position: ………………………………………..  Company Stamp if applicable |

|  |
| --- |
| **DECLARATION**  * I consent to the information provided on this form being used by Police CPI Limited for the purpose of vetting * I declare that the information I have given is true and complete to the best of my knowledge and belief * I undertake to notify Police CPI Limited of any material changes in the information I have given * I consent to a financial check being carried out. * I understand that any false statement or deliberate omission I have given in this questionnaire will cause my vetting to be rejected * I understand it is my responsibility to inform those named on the form that their details have been provided for the purpose of my vetting application * The information I have provided may be held on manual filing and computer systems as part of the vetting process |

|  |
| --- |
| Signature of applicant: Date: |

|  |
| --- |
| **DIVULGING OFFICIAL INFORMATION**  I hereby acknowledge that I clearly understand that the communication, whether verbal, written or any other form, to any person other than a police officer or a member of police staff, of information acquired as a result of work undertaken with the police service may be an offence against the Data Protection Acts and punishable by imprisonment.  I also understand that the communication, either verbal or written, to any person other than a police officer or a member of police staff of **any** information acquired as a result of my work partnership with the police service may result in the opportunity to work with the police service being withdrawn. |

|  |
| --- |
| Signature of Applicant: Date: |

**Form D part II (complete one for each Director / Signatory)**

**CSAS Company Director Vetting**

**Financial Information**

|  |
| --- |
| Name in Full: |
| Date of Birth: |

**Unless otherwise stated, please complete these questions in respect of the last six years.**

|  |  |  |
| --- | --- | --- |
|  | Yes / No | If yes, please provide full details – failure to do so could delay your application |
| Have you had a loan arrangement terminated by a bank/building society/finance house/other financial institution? |  |  |
| Have you had a credit/charge/store or cheque/debit card withdrawn |  |  |
| Have you been served with a default notice on any credit agreement? |  |  |
| Are you currently in arrears with any existing loan/mortgage/credit card/hire purchase agreement? |  |  |
| Have you ever been registered bankrupt? |  |  |
| **If yes**, have your bankruptcy debts been discharged?  **If yes**, when? |  |  |
| Have you ever been the subject of a County Court Judgement on a financial matter?  **If yes**, has the CCJ been cleared?  **If yes**, when?  ***If applicable,*** *please provide a copy of the Certificate of Satisfaction*  ***PLEASE NOTE APPLICATIONS WILL NOT BE ACCEPTED WHERE THERE ARE OUTSTANDING CCJs*** |  |  |
| Have you been party to a voluntary agreement registered with the County Court? |  |  |
| Have you had repossession proceedings commenced against you? |  |  |

|  |
| --- |
| **Declaration** I declare that all the statements I have made are true and complete to the best of my knowledge and belief.  I consent to Police CPI Ltd, on behalf of Chief Officers, undertaking such financial checks (i.e. credit reference check and/or financial questionnaire) as are necessary to verify my financial status for vetting purposes. I understand that all such information will be treated in the strictest confidence.  I undertake to notify any significant changes or additions in the information I have provided in this form.  I understand that if I have knowingly made a false statement or deliberate omission in the information I have provided in this form, my application may be rejected. |

|  |
| --- |
| Signature: Date: |