

BMH SPECIALIST APPROVAL QUESTIONNAIRE

This questionnaire must be completed by all businesses applying for British Motor Heritage (BMH) Specialist Approval.

It is important that all sections of this questionnaire are completed as fully and accurately as possible in order that we have a good understanding of the business prior to the formal assessment.

BMH Licences are granted to individual trading sites, they are not transferable. This questionnaire should be completed for the primary trading site only. An appendix to this questionnaire, available on request, should be completed for all secondary trading sites requesting BMH Specialist Approval.

Your responses will be reviewed and stored in the strictest confidence.

SECTION 1 - PRIMARY TRADING SITE

1.1 Full company name:

1.2 Full trading address:

1.3 Business Telephone No:

Business Fax No:

Business Website Address:

Business E-Mail Address:

- 1.4 Name of Principal or Chief Executive:
- 1.5 Name of the person responsible for this application for BMH Approval:
- 1.6 Please give details of business status e.g. Sole Ownership, Partnership, Private Limited Company, plc, other (please give details):

- 1.7 Company Registration Number (if applicable) and VAT Number:
- 1.8 Registered office address, if applicable: (If different to primary trading address)
- 1.9 Management structure. Please provide the names and job titles of executive directors and senior managers. An organisation chart of the business, where applicable, would be useful:

1.10 How long, in years, has the primary company been trading? (MUST EXCEED 3 YEARS)

1.11 Please give details of other names that this business has previously traded by:

1.12 Please give details of other trading names that are owned and/or used:

- 1.13 Please give details of any parent or associated companies:
- 1.14 Please give details of any franchises, dealership or distributorships agreements held:
- 1.15 Is the business affiliated to a professional body or member of a trade association? Please give details:
- 1.16 Please state names and addresses of all car clubs that recognise the business and state the level of recognition achieved:

1.17 Please give details of any importing or exporting activity:

1.18 Please advise of any manufacturing or assembly undertaken or licenses granted or received:

SECTION 2 - BUSINESS FINANCIAL INFORMATION

2.1 Please give details of the businesses expected gross annual turnover (Pounds sterling in current year) together with the value of equipment, inventory, debtors and creditors:

2.2 Please give details of estimated percentage of sales associated with the following categories:

(i)	Total on-site retail sales:	%	
	of which,		
	(a) Parts, accessories, etc.		%
	(b) Service, repair, restoration, etc.		%
(ii)	Mail order sales:	%	
(iii)	Trade/wholesale sales:	%	
(iv)	Other sales, please give details:	%	

All applications for BMH Approval will be strictly assessed for financial stability and credit worthiness. BMH will require a bank reference and three trade references. A confidential company search of the business will be undertaken, where applicable, and a statement of financial stability will be required from the businesses accountant. This information will be requested in writing by BMH following a satisfactory assessment.

SECTION 3 - NATURE OF PRIMARY BUSINESS

Please give full details of business seeking BMH Specialist Approval.

3.1 General description of the business:

- (i) List marques and models for which the business supplies parts:
- (ii) State whether stock is held for complete ground-up rebuild, major restoration, crash repair or car on the road spares only:

- 3.2 Vehicle Service (if applicable):
 - (i) List marques and models in which the business specialises:

(ii) State level of service carried out. e.g. Crash repair including/excluding paint, major or minor corrosion repair, general service including MOT testing, preparation for MOT testing only:

3.3 Vehicle restoration (if applicable):

(i) List marques and models in which the business specialises:

- 3.4 Please enclose with this completed Questionnaire copies of the businesses current parts catalogue, price lists and any other promotional material used in the business together with a company letterhead. If the business does not have a unique catalogue, describe how sales information is communicated to the customer:
- 3.5 Please give details of the publications in which the business currently advertises and enclose copies of current advertisements and any editorial coverage with this completed Questionnaire:

3.6 Please list the trade shows at which the business exhibits. Identify those that the business attends merely for promotional exposure and those that it attends in order to retail or trade its products:

SECTION 4 - PRIMARY BUSINESS PREMISES

- 4.1 Type of premises, e.g. Retail shop, Industrial unit, etc:
- 4.2 Area of primary trading premises in square metres (or square feet):
- 4.3 Business frontage, in metres (or feet):

4.4 Customer reception area, in square metres (or square feet):

- 4.5 Storage area, in square metres (or square feet). Include any mezzanine flooring:
- 4.6 Customer parking area, in square metres (or square feet). If not on site, please give details of nearest parking:

- 4.7 Please give details of loading and unloading facilities and equipment:
- 4.8 Please provide a plan and colour photographs showing all the above areas of the business.

SECTION 5 - PRIMARY BUSINESS STAFF

- 5.1 Total number of staff, including management listed in section 1.9:
- 5.2 Number of full time staff:
- 5.3 Number of part time staff:
- 5.4 Numbers of staff with specialist knowledge/skills/qualifications: (Please state numbers and their specialist skills)

SECTION 6 - BMH SPECIALIST APPROVAL LICENSES

- 6.1 Please give details of the classic car marque licenses for which you are applying together with the models in which you specialise:
 - (a) Marques:

(b) Models:

SECTION 7 - BUSINESS OBJECTIVES

7.1 Please describe, in general terms, your business objectives. These may relate to sales, staff,

marketing, training or any other area of the business activity. Please include how BMH may be involved in your objectives. Your response to this section could include an assessment of strengths and weaknesses of the business.

SECTION 8 - COMPLETION

Signature	of	Sole
Proprietor/Partner/Director:		
(Delete as necessary)		

Name:_____ Date:_____