

## Contractor Competency Questionnaire

<b>Organisation:</b>		<b>Contact Name:</b>	
<b>Address:</b>			
<b>Telephone:</b>	<b>Work:</b>	<b>Mobile:</b>	<b>Emergency:</b>
<b>Type of work being undertaken:</b>			
<b>Qualifications / experience / competency of people undertaking the work:</b>			

Please answer the following questions and supply the information requested. Please note that the disclosure of the information as requested in Q6 and 7 will not automatically mean exclusion from our list of contractors.

1.	Provide a copy of your organisations Health and Safety Policy.	Copy enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
2.	Supply examples of Risk Assessments prepared and provide details of how you communicate these to your workforce.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
3.	Who in your organisation has overall responsibility for management of health and safety? Include details of this person's experience and health and safety training.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
4.	Who provides competent advice to your organisation to help with health and safety? Include details of this person's experience and health and safety training.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
5.	Who on our site will be responsible for the health and safety of your activities? Include details of this person's experience and health and safety training.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
6.	No one will be allowed to work on this site without the correct Personal Protective Equipment. What is your policy for providing and maintaining PPE?	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>

7.	All accidents must be notified to management and entered in the Accident Book. Provide details of accidents or incidents reported by your organisation to enforcing authorities during the last three years.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
8.	Provide details of any prosecutions, prohibition or improvement notices issued to your business by any enforcing authorities in the last 3 years.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
9.	Provide details of how you will keep your working areas tidy and how you will manage your waste.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
10.	Provide details of how you will ensure the competence of your sub-contractors (if used).	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
11.	Provide details of maintenance / inspection registers and health and safety documentation that you keep.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
12.	Provide details of your approach to health and safety inspections and audits.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
13.	Provide a copy of your Liability Insurance Certificate.	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
14.	Are you a member of any trade associations / registered bodies for your trade? If so, please attach evidence	Details enclosed? Yes      No <input type="checkbox"/> <input type="checkbox"/>
15.	Please confirm you will ensure the safety of all machinery / equipment in use by yourselves on our site, e.g. that any lifting equipment is subject to regular examination under the Lifting Operations and Lifting Equipment Regulations?	Confirm Yes      No <input type="checkbox"/> <input type="checkbox"/>

On signing this questionnaire please note you are agreeing to:

- Inform us should there be any changes to the information provided above;
- Take full responsibility for the management and safe working of your staff and any sub-contractors under your control;
- Comply with all health and safety rules / requirements, as laid down by site management.

<b>Signed:</b>		<b>Date:</b>	
<b>Name:</b>			
<b>Job Title:</b>			