

CONTRACTOR PREQUALIFICATION ASSESSMENT

CONTRACTING COMPANY DETAILS

COMPANY NAME:

ADDRESS:

Telephone: _____ Fax: _____

Name of Person completing this form: _____ Position: _____

The purpose of this Document is to assist us in assessing the capability of your Company to effectively control risks to the health and safety of all involved in your work and to the environment.

CIS DETAILS & INSURANCES

Are you CIS Registered? Yes / No If Yes what is your CIS status? _____
Please enclose copies of your certificates.

Insurance expiry date: _____ Please attach your cover note.

HEALTH, SAFETY & ENVIRONMENTAL PERFORMANCE

1 HEALTH AND SAFETY POLICY

Please enclose a copy of your latest Health & Safety Policy Statement (as required under the Health and Safety at Work Act 1974)

2 COMMUNICATION OF INFORMATION / TRAINING

How do you ensure that your staff are informed and updated with Health and Safety information? E.g. toolbox talks, inductions and training. Please provide evidence that your staff have been given Health, Safety and environmental training - for example this could include qualifications, membership of relevant trade or professional body and training in health & safety. Continue separately if necessary.

3 HSE NOTICES/PROSECUTIONS OR ENVIRONMENTAL PROSECUTIONS

Please give details of any improvement, prohibition notices issued, or prosecutions against your Company, or Sub-Contractors to your Company, by enforcing authorities within the previous 3 years.

4 ACCIDENT / INCIDENT INVESTIGATION AND RECORDS

Please supply details of your Company accident statistics for the year to date and the previous two years and indications of their basis.

	Current Year	Last Year	Previous Year
Fatalities			
Serious Injuries			
3 Day Notification			
Near Misses			
Environmental Incident			

ENVIRONMENT

Please enclose your Environmental Policy and detail how you manage Environmental Risks, whether this conforms to any recognised standards (e.g. ISO14001). Continue separately if necessary.

QUALITY MANAGEMENT

Do you have a Quality Management System in place? Yes / No

Does it comply with a recognised standard (e.g. ISO9001)? Yes / No

DECLARATION

I declare that the information I have submitted is true to the best of my knowledge. I agree to abide by **????**'s terms and conditions and site rules, and adhere to all Health, Safety, Environmental and Quality standards. I agree to comply with all current CDM Regulations and commit to continually improve safety standards.

Signed on Behalf of the Subcontractor: _____

Print Name: _____

Job Title: _____ Date: _____

Document Enclosure Checklist:

- Insurance Cover Note
- Health and Safety Policy
- Environmental Policy and Management Details
- CIS Details
- Staff Training Records including CSCS card holders

<p>The Above Information has been checked including reference where necessary and the subcontractor is competent to carry out the scope of the works for which he will be engaged.</p> <p>Approval Granted by:</p> <p>Position:</p> <p>Date:</p>
--