



CLIENT OH&S RISK ASSESMENT

For Calibrate contractors engaged on - site

Client: _____

Location / Division: _____

Contact: _____

Date initiated: _____

Contractor / Job Function: _____

Reason for this information: We have a legal obligation to identify and control workplace hazards where our contractors are engaged. The information about your operation is used to determine an action plan for your site to protect our contractors from potential injury. We will provide guidance if necessary in respect of induction, necessity for PPE, licensing of contractors for compliance to legislation and risk minimisation planning in accordance with prevailing circumstances. We advise that should we determine that the risk to our representatives is unreasonable and this matter remains unresolved, that we may find it necessary to withdraw services if we feel unable to comply with OH&S legislative framework.

1. MAJOR WORKPLACE HAZARDS / PLANT/ SUBSTANCES / ACTIVITIES

a) Are there any particular hazards the contractor may be exposed to on site? YES / NO

If YES, please specify: _____

b) Are hazardous substances to be used by contractor? YES / NO

If YES, are MSDS's supplied? _____

2. MINOR HAZARDS OR RISKS

Are there any minor hazards that the contractor could be exposed to? YES / NO

If YES, please specify: _____

3. SITE & TASK SPECIFIC INDUCTION

Will you provide a specific induction on the contractor's arrival to the site that includes general site risks, emergency responses, safety operating procedures & on site safety / operator training? YES / NO

4. LICENCES / COMPETENCIES / SKILLS

What licenses, certificates, experience, skills or competences are required to perform the task: _____

5. PERSONAL PROTECTIVE EQUIPMENT / SPECIALISED EQUIPMENT

a) Is there any PPE or specialised equipment required for the contractor to carry out the project? YES / NO

If YES, please specify: _____

b) Will you supply all the PPE required to perform the task? YES / NO

If NO, what you expect the contractor to provide? _____

6. SUPERVISION

a) Will the contractor be supervised on site? YES / NO

b) Will you notify Calibrate Recruitment of any changes to the role or usage of any new equipment on site? YES / NO

7. ACCIDENT REPORTING PROCEDURE?

a) What is your accident reporting procedure? _____

b) Are you aware of your obligation to report immediately to Calibrate Recruitment any accident, that our contractor may be involved in? YES / NO

8. OTHER COMMENTS: _____

Name (print) _____

Title: _____