Information from Contractors on Site

Establishment and area where work is to be carried out:	
Contractor Name & Address: (include contact details)	
Person(s) carrying out work:	
Exact location of work:	
Start date:	
Finish date:	
Order No:	
Type of work:	
Scope of work:	

Question	Yes	No	N/A	Action/Precautions needed
Does the area need to be fenced off or enclosed?				
Will this block a fire escape route?				
Do any utilities need to be disconnected to do the work? (e.g. water, electricity, gas etc)				
Will there be excessive noise?				
Will there be excessive amounts of dust created?				
Will smoke/heat detectors be affected?				
Will the fire alarm be affected?				
Is there any "Hot Work" involved?				

Question	Yes	No	N/A	Action/Precautions needed
Will electricity extension cables be used?				
Will there be fumes from any paints, solvents, gases etc?				
Will any hazardous substances be used?				
How will open containers of hazardous substances be supervised?				
Who is going to carry out the cleaning after the work?				
Are there any other risks associated with the work that the establishment needs to be aware of? List below:-				
Signed:	(Cc	ontrac	tor) P	rint Name:

Company:	Date:	
oompany.	Date.	

To be given to the Manager/Building Custodian of the establishment **before** work commences.

Revised April 2012