



PHILIPS SURVEYORS

BUILDING SURVEYORS, DESIGNERS & CONSULTANTS

ASSESSMENT OF CONTRACTOR COMPETENCE AND RESOURCES

CDM REGULATIONS 2015

Project Name: Arundel Town Hall – Replacement Decking , Parapet repairs and associated works

Project Number: 2595.23

1.00	General Information
1.01	Please provide a copy of your Company's written Health & Safety Policy
1.02	Please give the name and title of the Director Responsible for Health & Safety.
1.03	Provide a copy of your current Employers Liability Compulsory Insurance, Public Liability Insurance and Contractors All Risks Insurance.
1.04	Please provide details of any enforcement notices or criminal proceedings taken against your Company over the last 5 years: (Include Health & Safety Executive, Environment Agency and Local Authority)
1.05	Please provide details of your accident performance for the last three years (including contractors and members of the public) including Fatal, Major Injury, or Non-Reportable
1.06	Is your organisation Accredited by (Please provide evidence of Registration or accreditation and date of expiry): SSIP Recognised Scheme (CHAS etc.) SAFE contractor Achilles OHSAS 18001 Other
1.07	How do you ensure the safety of the working practices and procedures used by your employees on site?
2.00	Health & Safety Training and Competence
2.01	Does your Company have a safety training policy?

PARTNERS P G ACTON BSc (Hons) MRICS
P O WILTSHIRE BSc (Hons) MRICS

ASSOCIATES W R COURT BSc (Hons) MRICS
G R MUSTION BSc (Hons) ACIAT
M A BROCKHURST (Hons) ACIAT



2.02	Please provide details of the training and qualification of key personnel including Managers, Supervisors and operatives (including sub contractors):
2.03	How do you assess the safety competency of sub-contractors and companies with whom you will place contracts?
3.00	Accidents / Incidents
3.01	Provide details of how you report and investigate accidents, incidents and near misses?
4.00	Risk Controls and Documentation
4.01	How and how frequently do you review your: Health & Safety Policy Risk and COSHH Assessments? Method Statements
4.02	Please demonstrate your process to communicate your Health & Safety Policy, Risk Assessments and Method Statements to your workforce
5.00	Work Equipment Inspections and Maintenance
5.01	How do you ensure that plant and equipment used on site by your employees is correctly registered, controlled and maintained in a safe working condition?
5.02	How do you ensure all on site electrical equipment is maintained and safe?
6.00	Workforce Consultation
6.01	You should have a means of consulting with your workforce on health & safety matters. You should include your documented consultation arrangements or other evidence of how you consulted with your employees.
7.00	Design / Design Checks (including Temporary Works)
8.0	Experience
8.01	Please provide details of 3 recent projects as references.

Declaration

As the Director responsible for this organisation's health & safety I declare this application represents a true reflection of my organisation safety management system.

Signed _____ Print Name _____ Dated: _____

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