ENGIE - BU Generation Europe

 European Maintenance Support

**Supplementary document - 241 Safety Information- Contractors**

**Please fill in this form and return it to your Electrabel ENGIE person responsible**

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| **WORK TO BE CARRIED OUT** |
|  |  | **Overhaul** |  | **Assembly** |  | **Supplies** |  |  |
| Description: | Location: |
| Start date: | End date: |
| Order N° | PREQ N°: |
| **CONTRACTOR IDENTIFICATION** |
| Company name: |  | Tel.: |
| Address: |  | Mobile: |
| E-mail: |  | Fax: |
| Safety certificate | VCA Safety Passport | Other: |
| Quality certificate | ISO-9001 |
| **Contractor’s persons responsible** | **Surname, First name** | **Tel. / Mobile** |
| Head of Safety dept. |  |  |
| External Health & Safety dept. |  |  |
| Works doctor |  |  |
| Worksite supervisor |  |  |
| Person responsible for safety on worksite |  |  |
| Person responsible for accident investigation |  |  |
| Dutch-speaking person responsible in each team on worksite? Asrequired by HSE regulations 4.4.3 | YES | NO |
| Operatives speak Dutch French | English | German |
| Max. N° of operatives DAY EARLY LATE NIGHT |
| HSE plan present on the site? | YES | NO |
| Persons with safety responsibilities/functions?If YES, attach copyof training and medical certificate | YES | NO |
| *Certificates E 101/E102(extension) for foreign employees* copyattached | YES | NO |
| **Organisational chart** for job described*attach copy* | YES | NO |
| **Do you work with subcontractors?***If YES, there must be a Safety Agreement for each. This must be discussed with the subcontractors’ persons responsible and a copy attached* | YES | NO |
| **Do you work with temporary employees? (agency****employees – young persons/job students)***If YES, attach copy with surname, first name, job title and job* | YES | NO |

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| QUALITY OF OPERATIVES |
| Operatives used for this job have more than 1 year of experience? | YES NOIf NO, attach copy with *surname, first name, job title and job* |
| Practical training/test required beforehand? | YES NOIf YES, attach copy with *type of training/test + name of pers. responsible* |
| Work carried out on basis of Process sheet/Quality plan? | YES NO |

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| ***1. Risks*** |
| For this job, the contractor works with: |
| Chemical reagents: *SDS attached* | Y | N | Own personal/collective protection equipment | Y | N |
| Work in enclosed spaces *cert. attached* | Y | N | Compressed air lines | Y | N |
| Lifting equipment *cert. attached* | Y | N | **Welding, cutting & burning** | Y | N |
| Scaffolding/suspended scaffolding | Y | N | Gas bottles | Y | N |
| Transport equipt. | Y | N | Use of higher risk workequipment ENGIE? List to be completed and attached | Y | N |
| Electrical panels & installations | Y | N |  | Y | N |

*LIMOSA-1 declaration for foreign employees copy attached* Y N

|  |  |  |
| --- | --- | --- |
| **Waste materials produced?**If YES, attach copy with list of types and quantities produced | Y | N |
| **Obligatory mentions?** *If YES, attach copy* | Y | N |

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| ***2. Risk analysis to be attached*** |
| Owner | Risk analysis & risk control measures for work and worksite environment! OK |
| Contractor | Risk analysis & risk control measures for carrying out work! OK |

**Declaration of intent**

**The OWNER hereby declares that the contractor has been informed of the risks specific to the work and the worksite environment by means of the attached risk analysis**

Read & approved

|  |  |  |  |
| --- | --- | --- | --- |
| Surname, First name | Position | Date | Signature |
|  |  |  |  |

The **CONTRACTOR** hereby declares:

• That he is familiar with the “Health, safety & environment rules for contractors carrying out work for Electrabel

ENGIE (attached to the order, or available for download at http://www.engie.com .

• That he has informed the Owner of the risks arising from carrying out the work, and has been informed by the

Owner of the risks specific to the work and the worksite environment.

• That he will inform all his employees and the managers of his subcontractors about the contents of this document and its attachments before the work commences.

Read & approved

|  |  |  |  |
| --- | --- | --- | --- |
| Surname, First name | Position | Date | Signature |
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