

<p>PROJECT NAME: _____</p> <p>COMPANY NAME: _____</p> <p>PREPARED BY: _____</p> <p>POSITION: _____</p> <p>CONTACT DETAILS: _____</p> <p>SIGNED: _____</p> <p>DATE: _____</p> <p>ACCEPTED BY WDCL: _____</p>	
<p>Site Safety Representative</p> <p>Our nominated on-site safety representative is:</p> <p>_____</p> <p>He/She shall participate in the development of this plan and manage the safety of our employees on site. He/She will also conduct weekly safety meetings, (or meetings as requested by Wallace Development Company Limited). He/She will also deliver daily/weekly tool box talks as required.</p>	<p>Confirm (tick)</p> <p><input type="checkbox"/> Yes</p>
<p>Notifiable Works</p> <p>We have notifiable works associated with this contract – if 'Yes', please complete Form 2.1.11 MBOIE Notification Form and send one copy to the nearest MOBIE Office, one to the project site office and retain a copy within this Site Specific Safety Plan.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>Hazard Management</p> <p>We acknowledge we have to complete the Hazard Control Plan within Section 2 (Forms 2.1.3) and shall ensure it is specific to our contracted works and we will be reviewing it with our employees at weekly Tool Box Talks.</p> <p>We have hazardous substances associated with our proposed works. If 'Yes', please complete Form 2.1.7 Hazardous Substance/Dangerous Goods Register and provide the appropriate current safety data sheets.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

<p>Communication and Consultation</p> <p>The following methods will be used and implemented during the contract:</p> <ul style="list-style-type: none"> ▪ Tool Box Meeting – refer Form 2.1.5 ▪ Hazard and Safety Information Boards ▪ Site Induction 	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p>
<p>Emergencies</p> <p>We have identified and have recommended a contingency plan for any potential Emergencies within our completed Hazard Control Plan involving any person under our control.</p> <p>In the event of an emergency evacuation, persons under our control will report to (state name): _____</p> <p>Persons under our control will assemble at the evacuation assembly point as detailed within the site induction and displayed on the Site Hazard Information Board and central location.</p> <p>We have trained First Aid persons (state names): _____</p> <p>In addition, we have suitable first aid and welfare provisions.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p>
<p>Incident Reporting and Recording</p> <p>We acknowledge that we are immediately required to, and shall report, record and investigate any type of incident (first aid, medical attention, near miss and serious harm injuries).</p> <p>We shall keep an accident/incident register on site and will assist in any incident investigation. Refer Forms 2.9 & 2.1.10.</p> <p>All serious harm injuries shall be reported to Wallace Development Company Limited and the main/head contractor and the Ministry of Business Innovation and Enterprise. Refer Form 2.1.11.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>Safety Monitoring Procedures</p> <p>We acknowledge that we will undertake weekly inspections, safety observations and Hazard Register/Board updating.</p> <p>We acknowledge that upon request by Wallace Development Company Limited we will take part in and assist with all safety audits conducted on site.</p>	

<p>Safety Training/Competency and Site Induction</p> <p>Any person under our control shall:</p> <ul style="list-style-type: none"> ▪ Receive a site induction ▪ Hold a current Site Safe Commercial Passport or Supervisor Gold Card ▪ Be trained and have the required competency to carry out their work and use plant and equipment safely ▪ Comply with all safety rules, Regulations & Acts 	
<p>Health and Safety Policy</p> <p>We attach a copy of our organisations/business's Health & Safety Policy.</p>	<input type="checkbox"/> Yes
<p>Insurances</p> <p>We attach Certificates of Currency for Public Liability and Third Party Vehicle insurances.</p>	<input type="checkbox"/> Yes
<p>Note</p> <p>Agreement to this Site Specific Safety Plan by Wallace Development Company Limited does not relieve the Contractor of any of their responsibilities under the Health and Safety in Employment Act.</p> <p>All submitted Site Specific Safety Plans are to be evaluated by the Project Manager for Wallace Development Company Limited. Any failed sections may result in an immediate return until a satisfactory plan has been re-submitted and agreed.</p>	

