



**Annual Renewal Questionnaire for acceptance onto the
Eurosafes UK Approved List of Contractors for Health and Safety
Contractors with 5 or more employees**

A	<p>State the name of your organisation and any details of amendments to the address, telephone number, e-mail address or web site address.</p> <p>State the name of the person dealing with this questionnaire, their contact phone/fax numbers and e-mail address.</p>	<p><i>Also please supply details of a secondary contact, detailing; name, title, phone/fax and e-mail address</i></p>	
B	<p>Please detail your main work activities.</p>	<p><i>Supply a brief summary of the activities you carry out e.g. electrical installer, general builder, plasterer etc.</i></p>	
C	<p>Please provide a copy of your current health and safety policy.</p>	<p><i>The policy should include:</i></p> <ul style="list-style-type: none"> • <i>a signed statement of intent</i> • <i>a responsibilities section</i> • <i>an arrangements section.</i> <p><i>The policy must be up to date and include references to latest relevant legislation.</i></p>	

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D	Competent Health & Safety advice.	<i>Please provide details of how your organisation and your employees have ready access to competent H&S advice, preferably within your organisation. Provide the name and competency details of the source of advice including a CV and evidence of competence e.g copies of certificates/professional membership.</i>	
E	Please list the number of individuals currently employed in the following areas:- <ul style="list-style-type: none"> • Office based managers • Site based managers • Site based operatives • Labour only sub-contractors • Total number of employees 	<i>e.g. directors, contracts managers e.g. site managers, foremen e.g. tradesmen, labourers etc. Self-employed operatives</i>	
F	Provide an updated training matrix detailing health and safety training undertaken by all staff.	<i>Please provide one set of samples certificates for each of the groups above, including first aid training.</i>	
G	Provide at least two sample current risk assessments. Also provide a method statement for an activity you would normally undertake on a construction site.	<i>Please provide completed current risk assessments for site specific tasks. Please provide a completed current method statement for a site specific task.</i>	
H	Provide details of arrangements you have in place to ensure	<i>Please provide evidence of your arrangements and their implementation</i>	

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	welfare facilities are in place before people commence work on site.	<i>which could include details of the type of welfare facilities provided on previous projects.</i>	
I	If you are acting in the role of Principal Contractor or you will be the only contractor working on a project, you are required under the Construction (Design & Management) Regulations 2015 to produce a Construction Phase Health & Safety Plan.	<i>Provide a copy of a recent completed Construction Phase Health & Safety Plan for a project.</i>	
J	Please provide a copy of your PLI and ELI insurance certificates and schedules.	<i>It is important that BOTH insurances are submitted. Your broker will assist with any queries you may have.</i>	
K	Copies of changed procedures.	<i>Please provide details and supporting evidence of any procedures that may have changed since your submission last year e.g. sub-contractor vetting, hot works etc.</i>	
L	Under your current name, or any previous title, please give details of any HSE improvement or prohibition notices, and any prosecutions in the last 12 months.		
M	Provide details of the number of RIDDOR accidents /incidents in the last 12 months.	<i>Include details of any actions taken to prevent re-occurrence. Where available please confirm your injury incidence and frequency rates.</i>	
N	Provide details of the company system for monitoring procedures and auditing them at regular intervals.	<i>Please provide evidence such as copies of formal reports, site inspection reports, evidence of recent monitoring and management responses.</i>	

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O	Provide details of how the company communicates with the workforce on Health & Safety Matters.	<i>Please provide details of your company arrangements and details of any appointed safety representatives together with evidence of how consultation is carried out such as records/minutes of any safety meetings.</i>	
P	Provide details of arrangements you have in place for co-operating and co-ordinating your work with others including contractors and suppliers.	<i>Please provide practical evidence of systems in place including procedural arrangements or project team meeting minutes.</i>	
Q	Provide details of arrangements for selecting, inspecting and maintaining work equipment to ensure safe conditions to the required standards.	<i>Provide details of your equipment policy arrangements and evidence of completed equipment inspection/maintenance e.g. plant inspection register, ladder inspection register etc.</i>	
R	Annual Renewal Submission Fee	<i>£246 inc. VAT</i>	Method of payment: Cheque <input type="checkbox"/> On line <input type="checkbox"/>

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Please return the completed questionnaire as follows:-

Eurosafe UK
Eurosafe House
Centurion Park
Tribune Way
York
Y030 4RY
Telephone:- 01904 691 515

E-mail:- cdm-competent@eurosafeuk.co.uk

Submit on line:- www.ssipassessors.com

www.eurosafeuk.co.uk

www.cloudsuk.com

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