

CONTRACTOR QUESTIONNAIRE

1. Name of organisation	2. Number of staff in organisation												
3. Contact person for health and safety	4. Do you have a health and safety policy? YES / NO												
5. Do you have a health and safety management system? YES / NO If yes who wrote the system? (Please supply a copy of system if audit not available)													
6. Do you have an audit of your health and safety management system that was carried out in the last 6 months? YES / NO If yes please supply a copy.													
7. Type of work carried out at Driving Miss Daisy NZ Ltd? (e.g. Cleaning, Electrical, Logistics, Engineering)													
8. Do you have a list of hazards for yourself or your worker or subcontractor who work at, or who visit, Driving Miss Daisy NZ Ltd premises as part of their duties? YES / NO If yes please supply the list.													
9. *What safety training has you or your worker or subcontractor had? <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%; text-align: left; padding: 5px;">Course Name</th> <th style="width: 33%; text-align: left; padding: 5px;">Course Date</th> <th style="width: 33%; text-align: left; padding: 5px;">Attendees</th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </tbody> </table>		Course Name	Course Date	Attendees									
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Do you keep records of course content of all training? YES / NO													
10. *Do you intend to employ casual or temporary labour or engage sub-contractors on this work? YES / NO If Yes give details: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%; text-align: left; padding: 5px;">Name</th> <th style="width: 33%; text-align: left; padding: 5px;">Contact Details</th> <th style="width: 33%; text-align: left; padding: 5px;">Attached Filled in copy of this form</th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="text-align: center; padding: 5px;">YES / NO</td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="text-align: center; padding: 5px;">YES / NO</td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="text-align: center; padding: 5px;">YES / NO</td> </tr> </tbody> </table>		Name	Contact Details	Attached Filled in copy of this form			YES / NO			YES / NO			YES / NO
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11. *Details of any hazardous materials/substances used by your organisation in relation to work at Driving Miss Daisy NZ Ltd (Attach MSDS): Do your workers have access to material safety data sheets when they are using these hazardous materials/substances? YES / NO													

12. How frequently are workplace assessments undertaken? WEEKLY / MONTHLY / SIX MONTHLY / YEARLY / OTHER

_____ **(PLEASE CIRCLE ONE) Is a checklist used? YES / NO** (Please Attach Checklist)

Who carries out the inspections?

13. Is an accident register maintained? YES / NO

Who is responsible for investigating and reporting accidents and dangerous occurrences?

14. * Details of personal safety/protection equipment issued to staff who are engaged for Driving Miss Daisy NZ Ltd work?

How is the usage/wearing of this safety/protection equipment enforced?

15. Do you or your workers or subcontractors have access to a first aid kit/s while working for Driving Miss Daisy NZ Ltd?

YES / NO

Do you supply a first aid kit/s for yourself or your employee or subcontractor while working for **Driving Miss Daisy NZ Ltd?**

YES / NO

Who is responsible for maintaining the first aid kit/s? _____

Is there a qualified first-aider available for you or your employee or subcontractor while working for **Driving Miss Daisy NZ Ltd?** YES / NO

16. *Do you have an emergency system in place for yourself or your employee or subcontractor while working for Driving Miss Daisy NZ Ltd YES / NO

If Yes give details?

17. *Have you ever been issued with an improvement notice, a prohibition notice, or prosecuted on health and safety grounds by Worksafe New Zealand or any other organisation, person or group? YES / NO

If Yes please give details:

18. Name of person filling in form: _____

Organisation: _____

Phone No. _____ **Postal address** _____

If a subcontractor which organisation do you subcontract for to provide service for Driving Miss Daisy NZ Ltd?

Please return the form and information to: *Franchisee Details Here*

Contractor Acknowledgement



Prior to commencement of any project or work on a Driving Miss Daisy NZ Ltd premise, this form is to be completed, signed and the criteria as stated below met. Also I/We will abide by and follow any health and safety management initiatives implemented by Driving Miss Daisy NZ Ltd while working on any of their sites or premises.

Definitions

- *"The Contractor" is to include any of the contractor's employees, sub-contractors or their subsequent employees*
- *"Driving Miss Daisy NZ Ltd" being management, supervisor or a nominated representative*

CONTRACTOR DETAILS

Company/Contractor Name:	
Name of Contractor's Representative:	

CRITERIA

1.	Submission to Driving Miss Daisy NZ Ltd of your health and safety policy and/or further relevant documentation showing hazard controls, task analysis, licences, certificates, etc. required to complete the contract/work.
2.	The contractor will participate in the induction process and be made aware of the hazards to the site/premise and the personal protective equipment staff are required to wear.
3.	Any sub-contractors (or subsequent sub-contractors' employees) as may be contracted to you have provided the appropriate documentation (as per criteria 1), are to be inducted and will comply with the conditions noted in this document.
4.	That any plant/ equipment that you bring onto Driving Miss Daisy NZ Ltd sites/premises shall meet safety and compliance requirements, be correctly maintained, is suitable for the purpose it is to be used for, and may be inspected upon request.
5.	The contractor understands their obligations under the Health and Safety Act and will comply at all times while working for Driving Miss Daisy NZ Ltd.
6.	Prior to commencement of work the contractor will advise Driving Miss Daisy NZ Ltd of any hazards that may be created during the work (task analysis and hazard assessment controls). If any unexpected hazards are created Driving Miss Daisy NZ Ltd shall be informed immediately so appropriate actions can be taken and documentation amended to suit.
7.	The contractor will not undertake any tasks or duties that will affect the safety of themselves or others and work may be suspended if Driving Miss Daisy NZ Ltd is not satisfied that all practicable steps are being taken.
8.	Driving Miss Daisy NZ Ltd shall audit the contractor's health and safety performance periodically during the term of the contract/work.
9.	The contractor will report to Driving Miss Daisy NZ Ltd immediately any incidents or accidents if they occur.
10.	The contractor shall advise Driving Miss Daisy NZ Ltd of any other emergency procedures that have been identified.
11.	The contractor shall provide "Task Analysis" for all jobs they are going to carry out as requested by Driving Miss Daisy NZ Ltd and the contractor shall adhere to them.
12.	This acknowledgement will be for the period of one year commencing from the date the acknowledgement is signed below unless stated otherwise.

SIGNATURES

Signed by authorised representatives of the Contractor and Driving Miss Daisy NZ Ltd

Contractor		Driving Miss Daisy NZ Ltd	
Name:		Name:	
Signature:		Signature:	
Date:	___/___/___	Date	___/___/___