



DIAGNOSTIC ENGINEERING INC.

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SAFETY INFORMATION

(as required by Partnership in Health and Safety, program of Alberta Labour)

Prime Contractor: _____

Prime Contractor's Address: _____

		YES	NO
1.	Under your Health & Safety Program, is there a contact person for Health & Safety issues? Contact Name:		
2.	Do you have safety inspection tours that will review our work on your site? If yes, how often?		
3.	(a) Are there procedures we can follow to report hazards?		
	(b) Are we notified when the hazards have been corrected?		
	(c) Are there specific Health & Safety hazards we should be aware of on your site?		
	(d) Are there WHMIS controlled products on your site we should be aware of?		
4.	Are there specific job procedures we are required to follow?		
5.	Will we be given a copy of the site rules we are expected to follow?		
6.	(a) Is there any specific PPE required on your work site?		
7.	Will we be given a copy of the Emergency Response Procedures we have to follow for:		
	(a) Site Evacuation (responsibilities, signals, communications)?		
	(b) Medical Emergency Evacuation?		
	(c) First Aid for serious injury?		
8.	Is site orientation required to work at your site?		
9.	Do we require specific training for work performed on your site? (H ₂ S Alive, WHMIS, etc..)		
10.	Will we be required to attend Safety Meetings at your site?		
11.	Are there specific procedures to follow for incident reporting?		
12.	Are there specific procedures to follow for accident investigation?		
13.	Are there any health monitoring procedures that we need to be involved in while at your site? (lead levels, hearing tests, etc..)		

Diagnostic Engineering Inc. Representative: _____ Phone: _____

Prime Contractor Representative: _____ Phone: _____

Date: _____

NOTE: Items answered "NO" require a written explanation.
