

Pre-qualification Questionnaire for Principal Contractors

Project:			
From			
Organisation Name:		Telephone:	
Address:		Fax:	
Email:		Reference:	
To			
Organisation Name:		Telephone:	
Address:		Fax:	
Email:		Reference:	
Completed by	Position:	Date:	Signature:
<p>Please answer the following questions and supply relevant information as requested, providing supporting details and documentation separately.</p>			
1. Provide examples of work carried out previously, which is comparable in size and nature to this project. Examples enclosed:			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. If five or more people are employed, provide a copy of your organisation's safety policy, as required by s.2(3) of the Health and Safety at Work Act etc., 1974 . Copy of policy supplied:			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Provide details of your organisation's health and safety management procedures. How will these be used to discharge your duties under CDM and ensure effective management of health and safety during the construction phase of this project? Detail enclosed:			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Supply examples of construction risk assessments prepared in accordance with the Management of Health and Safety at Work Regulation 1999 (SI 1999 No. 3242). Examples enclosed:			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>

PRE-QUALIFICATION QUESTIONNAIRE FOR PRINCIPAL CONTRACTORS (CONTINUED)

5. Provide details of your source of competent health and safety advice whether internal or external giving details of their experience and qualifications?

Name: _____ Position: _____ Telephone: _____

Address: _____ Fax: _____

Email: _____

6. Who in your organisation has day-to-day responsibility for the management of health and safety?

Name: _____ Position: _____ Telephone: _____

Address: _____ Fax: _____

Email: _____

7. Provide details of the experience and qualifications of the person named at 5. above. *Curriculum vitae* enclosed:

Yes No

8. Who will be responsible for site health and safety on this project?

Name: _____ Position: _____ Telephone: _____

Address: _____ Fax: _____

Email: _____

9. Provide details of the experience and qualifications of the person named at 8. above. *Curriculum vitae* enclosed:

Yes No

10. How many professional staff do you employ in your Head Office?

11. Provide details of the experience, qualifications, membership of professional bodies etc. and arrangements for continuing professional development of key staff who would be employed on the project. *Curriculum vitae* enclosed:

Yes No

Arrangements for continuing professional development enclosed:

Yes No

12. Have any formal notices been issued or legal proceedings been taken against your organisation by the Health and Safety Executive in the last 3 years?

Yes No

If yes, please provide details separately.

PRE-QUALIFICATION QUESTIONNAIRE FOR PRINCIPAL CONTRACTORS (CONTINUED)

13. Provide details of any accidents/incidents reported by, or on behalf of, your organisation to the Health and Safety Executive during the last 3 years (as required by the **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995** (SI 1995 No. 3163). Details enclosed:

Yes No

14. Provide an example of a health and safety plan which you have previously prepared at the tender stage. If you do not have one available, outline the methods you would adopt to format a reply to the pre-tender health and safety plan prepared by the planning supervisor. Details enclosed:

Yes No

15. How do you intend to manage, monitor, review and control health and safety during the construction phase of the project? Details enclosed:

Yes No

16. Provide details of the safety training which you have provided to your employees and to others to ensure their competence whilst they are employed on this project e.g. CITB Site Management Safety Training, CSCS Card or similar. Details enclosed:

Yes No

17. Provide details of how you intend to involve the workforce on this project and include details of names of appointed safety representatives, records of health and safety committees:

18. Provide details to illustrate how co-operation and co-ordination of your work is achieved with that of other contractors.

19. Provide details of the welfare facilities which will be provided prior to commencement of work on site and how these will be maintained.

20. What measures would you adopt to ensure the competence of the contractors to whom you propose to award work on this project and how you will ensure that these contractors also have arrangements for appointing any sub-contractors? What measures do you take to monitor these contractors performance? Details enclosed:

Yes No

21. What resources (including staff, equipment and technical facilities), as required by the **Construction (Design and Management) Regulation 2007** (SI 1994 No. 3140), does your organisation intend to allocate to this project? Details enclosed:

Yes No