|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name** |  | **Contact Name** |  |
| **Company Address** |  | **Contact Number** |  |
| **Subcontracted Work** |  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***1 – Company information*** | | | | | ***Evidence supplied and verified (internal use)*** |
| * 1. Does your company hold membership in any trade associations related to the subcontracted work? i.e Gas safe | |  | | |  |
| * 1. Does your company currently hold any third-party SSIP Health & Safety accreditations? I.e CHAS, Safecontractor etc | |  | | |  |
| ***If the company answers yes to 1.2 and evidence is supplied and verified, please proceed to section 3*** | | | | | |
| ***2 – Health & Safety Management*** | | | | | ***Evidence supplied and verified (internal use)*** |
| 2.1 If your company has 5 or more people employed in the business, please provide a current and signed ***Health & Safety Policy*** | |  | | |  |
| 2.2 Please provide details of how significant risks are identified and removed before projects are undertaken. Where required, please provide examples of Risk Assessments and ***Method Statements*** for recent works | |  | | |  |
| 2.3 Does the company undertake any work where substances deemed Hazardous to health will be used? If so, please provide examples of recent ***COSHH assessments*** for applicable substances. | |  | | |  |
| 2.4 What ***industry qualifications*** or ***trade-related experience*** does the company utilise in relation to the subcontracted work? Where applicable, please provide evidence of industry qualifications. | |  | | |  |
| 2.5 Do operatives within the company hold in-date ***CSCS cards*** relevant to subcontracted work being undertaken? Please provide evidence of CSCS cards where applicable. | |  | | |  |
| 2.6 Has the company been subject to any ***HSE prosecutions*** in the past 5 years? If so, please provide details. | |  | | |  |
| 2.7 In the last 3 years has the company had any ***accidents or incidents*** which have been reported to the Health & Safety Executive under its RIDDOR guidelines? If so, please provide detail | |  | | |  |
| 2.7 Where does your company obtain competent ***Health & Safety advice***? If you retain the services of a third party, please provide details of their qualifications. | |  | | |  |
| 2.8 please provide information on how ***monitoring*** of staff is undertaken within your company. Where applicable, please provide evidence of audits or inspections. | |  | | |  |
| ***3.0 Subcontractor authorisation status*** | | | | | |
| ***Based on the above assessment and supporting evidence, is the subcontracting company authorised to undertake subcontracted work on behalf of the company?*** | | | ***Yes*** |  | |
| ***No*** |  | |
| **Assessment completed by** |  | | **Assessor’s signature** |  | |
| **Subcontractor assessment date** |  | | **Next review date** |  | |
| **Additional Comments** | | | | | |
|  | | | | | |

**Important information – PLEASE READ BEFORE SUBMITTING**

The following page should be removed before any submissions to third parties as it acts as instructions for use and further information intended for you.

The above template has been created for you to use and apply to your tasks and situations. Before use, you should ensure that a competent individual has adequately assessed any additional questions relevant to your organisation, situation and subcontractor base.

While the questionnaire and evidence collection process aim to gather accurate and reliable information, it is important to understand that you are responsible for independently verifying the accuracy, completeness, and authenticity of the information provided by subcontractors. We cannot guarantee the accuracy or reliability of the information provided through this process.

It is your sole responsibility to ensure compliance with all applicable laws, regulations, and contractual obligations related to data privacy, nondisclosure agreements, and any other legal requirements governing the collection, storage, and use of subcontractor information.

**For additional assistance and further template documentation:**

**www.safetyplace.co.uk.**