

SUB-CONTRACTOR COMPETENCE ASSESSMENT

COMPANY NAME	PLEASE RETURN THE COMPLETED QUESTIONNAIRE TO: Derek Kerr Socius Projects 2 Westfield Road Henlow Bedfordshire SG16 6BN info@sociusprojects.co.uk
ADDRESS	
TELEPHONE	
FAX	
WEBSITE	
EMAIL	
DIRECTOR RESPONSIBLE FOR HEALTH AND SAFETY	

IF YOU ARE ACCREDITED WITH CHAS, CONSTRUCTIONLINE, SAFECONTRACTOR or other SSIP accredited companies please PROVIDE EVIDENCE and complete sections 1, 4 and 5 only

1. Policy

1.1	Please outline your general management organisational structure with regard to the allocation of duties, delegation of responsibilities, etc. in relation to health and safety.	
1.2	Please provide details of any external safety consultants who provide advice on health and safety matters.	
1.3	Please provide details of all prohibition, improvement or other enforcement notices issued against your company within the past 5 years.	
1.4	Please provide records of any accidents, injuries and dangerous occurrences over the last 3 years.	

2. Training

2.1	Please provide details of the health and safety training undertaken by your employees.	
2.2	What percentage of your staff has valid CSCS cards?	

3. Communication, Co-operation and Risk Assessment

3.1	Describe how you consult with your employees with regard to health and safety information.	
3.2	Provide details of how the company will identify significant health and safety risks and how they will be controlled.	

4. General

4.1	Please identify your trade capabilities/Specialist field.	
4.2	Please provide a list of similar works your organisation has undertaken. Please include details of the type of work undertaken, the date and the approximate value of the works.	
4.3	Please state the MAXIMUM number of contracts you would be prepared to undertake at any one time	
4.4	Please state the MINIMUM & MAXIMUM contract value you would be prepared to undertake.	
4.5	Please provide copies of your Employee and Public Liability and Professional Indemnity Insurances.	
4.6	Please provide, if applicable, CIS registration details.	UTR /NI NUMBERS
4.7	Would you permit our representatives to carry out an inspection of your operations at any site at which you are currently working?	YES/NO

5. Environmental

5.1	Does your company hold ISO 14001, EMAS or BS8555 certification?	YES/NO
5.2	Do you have an Environmental Policy Statement?	YES/NO
5.3	Do you have Waste Management procedures?	YES/NO
5.4	Do you have pollution control procedures?	YES/NO



DECLARATION

I hereby declare that the information given in this questionnaire is true to the best of my knowledge and belief.

Should we further sub-contract any elements of the work for the proposed contract, we undertake to make similar enquiries of any contractor or designer concerned and to satisfy ourselves of their competence and that they have or will allocate sufficient resources to carry out their duties and obligations under the Construction (Design and Management) Regulations 2007.

Signature of Director named above

Company

Date

CONTACT FOR FURTHER DETAILS

FOR INTERNAL USE ONLY

EVIDENCE OF ACCREDITATION PROVIDED YES / NO

APPROVED

NAME

SIGNATURE

DATE

NOT APPROVED

ACTION TAKEN

NAME

SIGNATURE

DATE
