

New Contractor Form

Company name and ABN:

Contact:

Company address:

Company phone number:

Email:

Please provide banking details

Account name:

BSB number:

Account number:

Workcover Insurance details

-Please provide a copy of Workcover insurance

Public Liability insurance

-Please provide a copy of Public Liability insurance

Health, Safety and Environmental Requirements

Do you commit to:

Y

Working safely?

Participate in site based Risk Assessment activities and toolbox talks?

Conduct all works in accordance with site induction requirements?

Conduct all works in accordance with the relevant risk assessment or SWMS?

Provide current personal qualification records?

Use only plant which you are sufficiently qualified or trained to use?

Comply the requirements of Foursite Constructions Quality, OHS and Environmental Policies?

Report Incidents, Near Misses and Property Damage to Foursite constructions as soon as reasonably able?

ADMIN to complete

- ☐ Insurances entered into Procore
- ☐ Banking details entered into Xero
- ☐ Workcover - Copies provided and filed in Procore
- ☐ PL insurance - Copies provided and filed in Procore
- ☐ Is PL insurance >\$10m, if not issue to Max for comment and sign-off
- ☐ Max note:

Max signature:

Date signed:

Admin signed:

Date: