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Form / Reg ID	Form / Register Name Mainly for construction / maintenance contract management	Functional Area	Document Type	File Ext.
		011 11 1	-	_
1a	Inspection and Test Plan (ITP) Form	Qlty Mgt	Form	.xlsx
1b	Inspection and Test Plan Form Notes	Qlty Mgt	FormNotes	.xlsx
2	Inspection and Test Plan Register	Qlty Mgt	Register	.xlsx
3a	Punch List (PL) Form	Qlty Mgt	Form	.xlsx
3b	Punch List Form Notes	Qlty Mgt	FormNotes	.xlsx
4	Completion (PL) Register	Qlty Mgt	Register	.xlsx
5	Non-Conformance Report (NCR) Form	Qlty Mgt	Form	.xlsx
6	Non-Conformance Register	Qlty Mgt	Register	.xlsx
7	Site Instruction (SI) Form	Qlty Mgt	Form	.xlsx
8	Site Instruction Register	Qlty Mgt	Register	.xlsx
9	Variation Order (VO) Form	Qlty Mgt	Form	.xlsx
10	Variation Order Register	Qlty Mgt	Register	.xlsx
11	Transmittal Form	Qlty Mgt	Form	.xlsx
12	Transmittal Register	Qlty Mgt	Register	.xlsx
13	Welding Control Sheet with Materials Traceability Form	Qlty Mgt	Form	.xlsx
14	Welders Record Sheet with Materials Traceability Form	Qlty Mgt	Form	.xlsx
15	Welding Control Sheet without Materials Traceability Form	Qlty Mgt	Form	.xlsx
16	Welders Record Sheet without Materials Traceability Form	Qlty Mgt	Form	.xlsx
17	Project Risk Register	Proj Mgt	Register	.xlsm
18	Job Risk-Hazard Analysis Form	HSE Mgt	Form	.xlsx

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Form / Register Name	Functional	Document		
Mainly for construction / maintenance contract management	Area	Type	File Ext.	
<u>.</u>	_			
Toolbox Meeting Record Form	HSE Mgt	Form	.xlsx	
Toolbox Meeting Register	HSE Mgt	Register	.xlsx	
Contract Health and Safety Performance Statistics Report	HSE Mgt	Report	.xlsx	
Contract Contact List Form	HSE Mgt	Form	.xlsx	
Site Inspections - All Categories Form	HSE Mgt	Form	.xlsx	
Site Inspection Register	HSE Mgt	Register	.xlsx	
Site Inspection Corrective Action Request (CAR) Form	HSE Mgt	Form	.xlsx	
Site Inspection Corrective Action Request Register	HSE Mgt	Register	.xlsx	
Site Hazard Register	HSE Mgt	Register	.xlsx	
Hazardous Substance Register	HSE Mgt	Register	.xlsx	
Notifiable Works Register	HSE Mgt	Register	.xlsx	
Incident-Accident Register	HSE Mgt	Register	.xlsx	
Event Investigation Register	HSE Mgt	Register	.xlsx	
Site Visitors Register	HSE Mgt	Register	.xlsx	
Worker Competency Register	HSE Mgt	Register	.xlsx	
Machine Thermal Alignment Form	Equipment	Form	.xlsx	
Machine Thermal Alignment Form Example	Equipment	Form	.xlsx	
	Mainly for construction / maintenance contract management Toolbox Meeting Register Contract Health and Safety Performance Statistics Report Contract Contact List Form Site Inspections - All Categories Form Site Inspection Register Site Inspection Corrective Action Request (CAR) Form Site Inspection Corrective Action Request Register Site Hazard Register Hazardous Substance Register Notifiable Works Register Incident-Accident Register Event Investigation Register Site Visitors Register Worker Competency Register Machine Thermal Alignment Form	Toolbox Meeting Record Form HSE Mgt Toolbox Meeting Register Contract Health and Safety Performance Statistics Report HSE Mgt Contract Contact List Form HSE Mgt Site Inspections - All Categories Form HSE Mgt Site Inspection Corrective Action Request (CAR) Form HSE Mgt Site Inspection Corrective Action Request Register HSE Mgt	Toolbox Meeting Record Form Toolbox Meeting Register Contract Health and Safety Performance Statistics Report Contract Contact List Form HSE Mgt Form HSE Mgt Report Contract Contact List Form HSE Mgt Form Site Inspections - All Categories Form Site Inspection Register HSE Mgt Register Site Inspection Corrective Action Request (CAR) Form HSE Mgt Form Site Inspection Corrective Action Request Register HSE Mgt Register	Mainly for construction / maintenance contract management Area Type File Ext. Toolbox Meeting Record Form HSE Mgt Form Julyx Toolbox Meeting Register HSE Mgt Register Julyx Register Ju

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35	<u>42, 43, 44</u>

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	INSPECTION & TEST PLAN (ITP)												
Inspe	ction & Test Point									Type /			
	<u>Legend</u>	Contr								Scope:			
_ Ual	d Daint		ntract							TP No:			
= Hold Point No / Descr = Witness Point													
= Document Review Subcontracto							Revision No:						
= Sur	veillance	Subco											
		No / E	escr:							Date:			
Act No.	Manufacturing Construction Ac Description	ctivity	Ву	Inspe	ction & Test Activity Description	Activity Control Procedure	Acceptance Criteria	Verifying Document	Contractor Inspection Point	Contractor's Rep Initials	Principal Inspection Point	Principal Rep Initials	Comments
(1)	(2)		(3)		(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
					tractor of responsibility		Principal's Accepta	ance By:					Date:
mplia	nce with Contract to				t appropriate acceptanc	e box below.							
CCEPTED, ork may proceed ACCEPTED AS NOTED, REVISE & RESUBMIT, Work may proceed NOT ACCEPTED, REVISE & RESUBMIT, Work may 'not' proceed													
		ork may	proce	-	more proc	oou							

Inspection & Test Plan (ITP) Form Notes



Col#	Column Heading	Column Contents Description	Who
1	Activity Number	The manufacturing, construction or maintenance activity number in logical process sequence. (Includes procurement, fabrication, transport, receipt on site, construction, commissioning etc.)	SP or Contractor
2	Manufacturing or Construction Activity Description	Describe the construction, manufacturing or maintenance activity	SP or Contractor
3	Ву	Identify who performs the work described in column 2.	SP or Contractor
4	Inspection & Test Activity Description i.e. Inspection & Test Point	Describe the quality activities or quality characteristics to be verified associated with the work activity in column 2	SP or Contractor
5	Activity Control Procedure	Identify quality system procedure or instruction reference for conduct of QC activity defined in column 4	SP or Contractor
6	Acceptance Criteria	Identify design specification(s) or code(s) and respective section(s) and clause(s). Also include any critical parameters.	SP or Contractor
7	Verifying Document	Identify the document(s) used to verify acceptance of QC activity performance	SP or Contractor
8	Contractor Inspection Point	Define inspection type i.e. \mathbf{W} = Witness, \mathbf{H} = Hold, \mathbf{R} = Review, \mathbf{S} = Surveillance.	SP or Contractor
9	Contractor Initials	Leave blank for later verification.	SP or Contractor
10	Principal's Inspection Point	Define inspection type i.e. \mathbf{W} = Witness, \mathbf{H} = Hold, \mathbf{R} = Review, \mathbf{S} = Surveillance.	Principal's Representative
11	Principal's Representative's Initials	Leave blank for later verification.	Principal's Representative
Additio	ռահո նվում sication	Additional qualifying data as required.	Both as appropriate

> Inspection and Test Point

A point or stage in the fabrication and construction cycle where an inspection or test activity is performed. All inspection and test points in the process should be recorded in the ITP.

Principal's Witness Point

An inspection and test point on the ITP designated by the Principal as an activity to be observed by the Principal's Representative. If a Principal's Representative is not present at the prearranged time and assuming due notice was given, the Service Provider or Contractor may proceed with the activity.

> Principal's Hold Point

An inspection and test point on the ITP designated by the Principal as a point beyond which the Contractor will not proceed without authorisation. The activity will normally be witnessed by the Principal's Representative although in some circumstances, the Contractor may be notified in writing that the activity may proceed without the Principal's Representative.

> Surveillance (Monitoring)

Continuing evaluation by Principal and Contractor of the status and use of procedures, methods, inspection activities and records analysis to ensure quality requirements will be met.

> Review

Examination of documentary evidence related to inspection and test activities to verify that activities have been conducted satisfactorily and that results are acceptable.



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<u>ITP REGISTER</u>												
Ctt						Contract						
Contractor:						ID:						
Contract:												
		Work Scope Detail	S					ITP Deta	ils	Date		
	nt System ription	Plant Area / Section / Sub-system / Discipline / Asset Item Description	Test Pack / Asset ID	Work (Test) Pack / Asset Name Description	Item No	ITP ID ▼	ITP Discipline	ITP Status	Date Submitted By Contractor	Partially	Date Fully Accepted Without Limitation	



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	PUNCH LIST (PL)												
Priorit	y Legend												
	mediate		Contractor:						Contr	act No:			
	or to Practical C		Plant/System/						Pun	ch List			
	or to Product In		P&ID#:							Type:			
D = After Product Introduction Area/Section#/ Description:									Dis	cipline:			
tem No	Asset No		Date Raised		Date to Complete	Contractor's Rep Initials	Principal's Rep Initials	RI / TPI Initials As Reqd	c	Comments	Audit		
(1)	(2)		(3	3)	(4)	(5)	(6)	(7)	(8)	(9)		(10)	(11)
PL	. Inspection By:												
	nis punch list is not to be considered final or complete and may be subject the results of further inspections and/or tests.					Principal's Representative:					·	Punch List ID:	

PUNCH LIST NOTES

Careful, timely punch listing or completion reporting is essential in moving from the advanced stages of field construction to practical completion in a controlled manner with minimum delay. Punch listing includes verification of work completion and satisfactory completion of all 'receiving' and 'in-process' inspection, testing and verification required by CQP, ITPs and any other documented procedures.

1. Preliminary Punch Lists

(I.e. plant area, section, sub-system, discipline, asset item etc.)

Preliminary punch lists are single discipline punch lists for discrete, 'bite sized' sections, subsections or single components of larger more complex systems. E.g. piping test packs form discrete sections of a complete plant process system, steel structures support process vessels and piping etc.

Punch lists should be divided into the following typical disciplinary groups, civil, building, structural steel, piping, vessels, rotating equipment, electrical, instrumentation, surface protection, insulation etc.

Initial punch lists should focus on the outstanding work required to either enable progression to the next major construction step (e.g. pre-hydro punch list in the case of piping), system punch listing or practical completion. Preliminary punch listing should be undertaken as early as practicable to facilitate the earliest practicable completion. Preliminary punch lists should include work requiring correction, work requiring completion and work not started

2. Plant / Plant System Punch Lists

When a plant or system is substantially complete, the complete entity should be punch listed to ensure that all system components have been installed in accordance with P&IDs, instrument diagrams, single line diagrams, loop diagrams and other specifications.

System punch lists should focus on safe and complete operability, which requires adequate working knowledge of system components and familiarity with both process and general operating requirements. System punch listing should be undertaken as late as practicable to take full advantage of initial punch listing. System punch lists should include (but not be limited to) the following.

- Equipment and associated services completed, tested and test blinds removed.
- Piping and valves tight, clean and installed to P&ID.
- Instruments connected, tested and calibrated.
- Electrical equipment tested and operable
- · Personnel safety requirements completed.
- Accessibility requirements completed.
- Plant area tidy with scaffolding and other construction facilities removed.
- · Statutory requirements (codes, permits, regulations etc) complete

3. Punch Listing

Punch lists should be prepared using the standard punch list form and identified with a unique sequential list number relating to contract, system, area work pack or P&ID as appropriate by the principal's representative. Punch lists must be legible, contain sufficient location detail to enable others to find work items and defect and outstanding work descriptions must be clearly understandable by all concerned. Priorities (defined on the punch list form) and required completion dates must be specified for all punch list items.

Punch list originals are sent to the contractor under transmittal for inclusion in the final QC MDR where they can be progressively signed off by the contractor and the principal's representative as punch list work items are completed. The principal's representative will retain copies of original punch lists.

4. Completion Monitoring / Completion Register

Punch listing or completion reporting is carried out for both quality and contractual purposes. The full punch-listing programme should be identified when contract works commence and subsequently monitored to ensure that nothing is overlooked, and that facilitation of the completion process is optimised.

Once QC test packs have been defined and P&IDs marked up, the principal's representative will compile a completion register by setting up a completion register for each major system and service provider or contractor. The proposed test packs and punch lists for which a service provider or contractor is responsible are listed in respective completion registers. As the punch listing / completion inspection process is completed, completion dates for respective punch list items are noted on the punch list form so that there's always a clear, up-to-date record of





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	COMPLETION REGISTER												
Ctt								Contract					
Contractor:								ID:					
Contract:													
		Work Sco	pe Details						Pu	ınch List Det	ails		
Plant, Plant Descrip		Plant Area / Section / Sub-system / Discipline / Asset Item Description	Test Pack / Asset ID	Test Pack / Asset Item Description	Date Reqd Tests & NDT Completed	PL Item No	PL Type	Punchlist Discipline	Date PL Inspection Competed	Date PL Issued to Contractor	Date A / B Items Completed	Date Remaining Items Cmpltd / Trnsfrrd	PL Status



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Received By: (Contractor)				Date:	
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Signed:					
(Prncpl's Rep)	S REPRESENTATIVE	RE-INSPECTION:		Date:	
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Contract Name:												
Date NCR Initiated	NCR No	Asset ID	Asset Name	NC Summary (Short description)	NC Issued By (Principal's Rep)	NC Received By (Contractor)	Date Received By Contractor	Contractor's Response / Disposition	Principal's Disposition / Acceptance	Date of Principal's Disposition	Principal's Re-inspection Acceptance	NC Reinspected By (Principal's Rep)
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Approved By:					Title:			
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	SITE INSTRUCTION REGISTER												
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				Document Transmittal Notice								
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	Document Transmittal Register													
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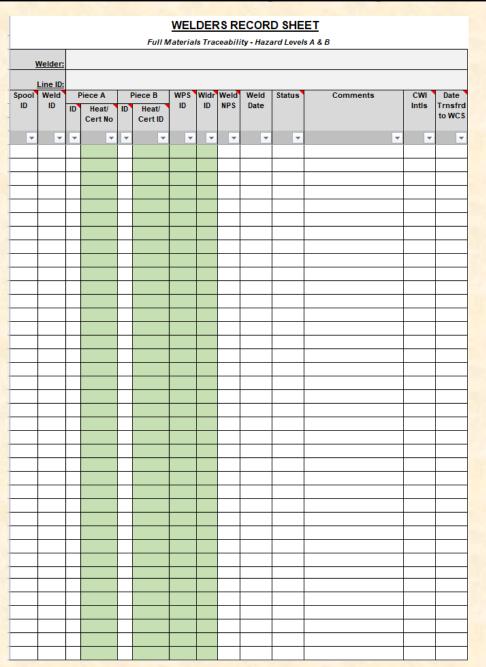
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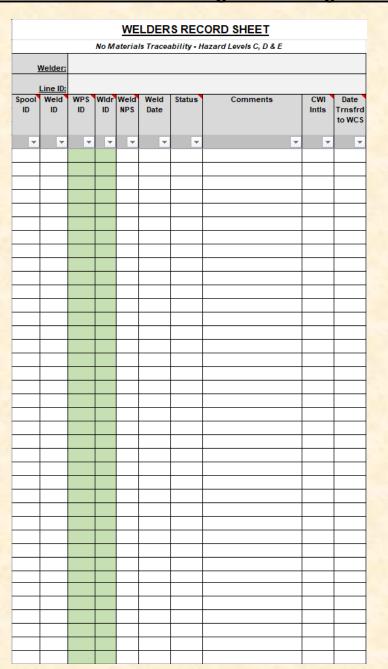
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	WELDING CONTROL SHEET (WCS)																		
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	PROJECT RISK REGISTER							1 Cond	Conditional Formatting 25 Columns 0,I													
Pro	oject:																	Date:				
Risk ID	Risk Description	Associated WBS Task ID	Risk Type	Risk Impact Type	Unmitigated Risk Probability	Unmitigated Risk Impact	Unmitigated Risk Score	Mitigation Action ID	Mitigation Action	Mitigation Effectiveness	Mitigated Risk Probability	 Mitigated Risk Impact 	 Mitigated Risk Score (Calc'd) 	Contingency Reqd?	Contingency Action	Contingency Action Trigger	Contingency Action Optimistic	Contingency Action Most Likely Duration (ML)	Contingency Action Pessimistic / Maximum	Time Units Weeks / Days /	Contingency Action Calculated Expected Duration (PERT)	Project Total Schedule Contingency or Reserve
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	Job Description:									
 Activity ID 	Activity Description	← Hazard Activity ID	Risk/Hazard	Notifiable Work		← Highest Risk X X X X X X X X X X X X X X X X X X X	Ţ	← Control Activity ID	Notifiable Work Notifiable Work Highest Risk Principal Risk	Comments
*	▼	~	▼	¥	7	7	7	7	V V V	▼
1										
2										
3										
4							L			
5										
6							L			
7							L			
8							L	L		
9										
10										
12										
	Work Permits Required:		Work Permit Extensions Required:							



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			TOOLBOX	MEETING	RECORD		
	Contract:					I	Date:
	Site:				Team:		
resent							
Spare	•	Spare	Spare	Spare	Spare	Spare	Spare
Spare		Spare	Spare	Spare	Spare	Spare	Spare
Spare		Spare	Spare	Spare	Spare	Spare	Spare
Spare		Spare	Spare	Spare	Spare	Spare	Spare
Spare	9	Spare	Spare	Spare	Spare	Spare	Spare
Absent: Spare	•	Spare	Spare	Spare	Spare	Spare	Spare
Spare		Spare	Spare	Spare	Spare	Spare	Spare
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1							
2							
3							
4							
5							
6							
7							
	Handouts:						
	s & acciden	its OR task an	alysis review:				
1							
2							
3							
4							
5							
6							
7							
	Handouts:						
Correct	ive actions:						
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2							
3							
4							
5							
6							
7							
1							
lananda	Handouts:			and discu			
1azaros	anu emerg	ency procedu	res raised by empl	oyees and discu	sseu.		
2							
3							
4							
5							
6							
7							
	Handouts:						
Other:							
1							
2							
	Name:	Spare	Designation:		Signature:		





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	TOOLBOX MEETING REGISTER									
	Contract:									
	Site:									
♦ Item ID	Meeting Date	Team	Meeting Leader ▼	Location	No Unresolved Issues	Mtg Record Distributed	Unresolved Issues	Date Issue Resolved		
1					0	0				
2										
3					0	0				
4										
5					0	0				
6					0	0				
7										
8										
9										
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26										





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\mathbf{J}		15	ZU	UI.	77

CONTRACT HEALTH &	SAFETY PERIODIC PERF	ORMANCE EVALUATION

Contract:	
Period:	Evaluation Date:

	Principal C	Period	
Period Metrics			Totals
No of JHAs / Task Analyses carried out			0
No of safety inductions carried out			0
No of toolbox meetings held			0
No of toolbox meeting minutes completed			0
No of site safety inspections completed			0
No of incidents identified			0
No of incident investigation forms completed			0
No of incident causes identified			0
No of incident corrective actions identified			0
No of incident corrective actions completed			0
Time on project (man-hours)			0
No of medical treatment accidents			0
No of lost time injuries			0

	Contract Cumulative by Period							Cmltv
Cumulative Metrics								Totals
No of JHAs/Task Analyses carried out								0
No of safety inductions carried out								0
No of toolbox meetings held								0
No of toolbox meeting minutes completed								0
No of site safety inspections completed								0
No of incidents identified								0
No of incident investigation forms completed								0
No of incident causes identified								0
No of incident corrective actions identified								0
No of incident corrective actions completed								0
Time on project (man-hours)								0
No of medical treatment accidents								0
No of lost time injuries								0

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CONTRACT CONTACT LIST

Contract:						
Company	Name ▼	Position	Site Landline #	Mobile #	Email Address	¥
						_
						_
						_
						_
						_
						_
						_
						_





SITE SAFETY INSPECTIONS - All Categories SI								
		Contract:						
		Area:						
		Innector		Pate				
_		Inspectors: Inspection Categories / Issues	ng	Date: Observations				
T,		inspection categories / issues	Rating	Observations				
١_	Haz	ards						
\	1	Are hazards managed adequately?						
١	2	Is there adequate site signage / hazard board?						
\	3	Is there a visitors log present?						
\	4	Are all personnel being inducted correctly?						
	5	Are emergency procedures in place?						
\		Are emergency evacuation drills held at prescribed frequency?						
	7	Are subcontractors safety plans available?						
	8	Are subcontractors safety meetings held?						
		Are toolbox meetings held?						
		Are all workers passports being verified?						
\		Is hazard identification being done and managed effectively?						
	12	Is task analysis being done for significant operations?						
١		Has all notifiable work been notified in a timely manner?						
\	14	Is a permit to work system in place and is it used effectively?						
3	Fac	ilities						
3_	1	Are site offices clean and tidy?						
3	2	Are ammenity areas clean and tidy?						
3	3	Is lunch room and food prep area clean and tidy?						
3	4	Are temporary electrical installations tagged?						
3	5	Are first aid kits in place and well stocked?						
3	6	Is lighting adequate?						
	7	Are fire extinguishers charged and current?						

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			SITE SAFETY INSPECT	10	NS - All Categories
		Contract:			
		Area:			
		Inspectors:			Date:
			ction Categories / Issues	Rating	Observations
ŢŢ	Hor	unkooning		Ra	
L	HOL	ıskeeping			
С	1	Are work area	s clean and tidy?		
С	2	Are materials	stacked safely?		
С	3	Are rubbish bi	ins provided and emptied regularly?		
С	4	Are combustil	ble materials stored safely?		
	5	Is lighting ade	equate?		
С	6	Is public prote	ection adequate?		
D		ndard Ladders			
D	1	Are ladders in	dustrial rated and in good condition?		
D	2	Are stiles / rur	ngs / back stays undamaged?		
	3	Are ladders us	sed correctly & secured top & bottom?		
E		p Ladders	·		
E	1	Are ladders in	dustrial rated and in good condition?		
E	2	Are stiles / rur	ngs / back stays undamaged?		
E	3	Do personnel	work no higher than third step from top?		
E	4	Are ladders u	sed correctly?		
F	Sta	nding Scaffold	I		
F	1	Is scaffold ere	ected by certified scaffolders?		
F	2	Is Scaf-tag / A	cu-log scaffold register up to date?		
F	3	Is ladder acce	ess to scaffold adequate?		
F	4	Are guard rail:	s between 0.9 and 1.1metres?		
F	5	Are intermedia	ate rail / stop ends in place?		
F	6	Is debris netti	ng in place where necessary?		
	7	Are 225 mm r	minimum toe-boards in place?		
F	8		atforms have a minimum width of three		
F			cured adequately?		
F			es and sole plates adequate?		
F			acing adequate?		

Slide 2

Slide 2/5



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	SITE SAFETY INSPECTIONS - All Categories Contract:													
		Contract:												
		Area:												
		Inspectors:		Date:										
		Inspection Categories / Issues	Pating	Observations										
T,	Mol	bile Scaffold	۵											
_	WIOI	bile scariola												
;	1	Are mobile scaffolds set up on firm ground?												
3	2	Are wheels locked?												
3	3	Is diagonal bracing across base adequate?												
	4	Are decks fully planked and secure?												
3	5	Are guard rails between 0.9 and 1.1metres?												
		Are 225 mm minimum toe-boards in place?												
•		Is access safe and appropriate?												
3		Are outriggers in place when scaffold height is >3 times base width?	3											
3		Is scafflod bracing adequate?												
3	10	Are scaffolds only moved without personnel aboa	ard?											
H	Elev	vated Work Platforms (EWPs)												
	1	Are EWPs set up on level ground with outriggers extended?	fully											
	2	Are EWPs inspected / tested within last 6 months [visible certificate]?	,											
		Are EWPs operated at least 4 metres from power lines?	1											
	4	Is fall prevention harness worn?												
1	5	Is lanyard fixing adequate? Are EWP operators trained and competent to use	FWP											
	6	unsupervised?												
L	Elec	ctrical												
	1	Is portable electrical equipment tested, certified a tagged three-monthly?	and											
		Are leads clear of water and out of harm's way?												
		Are ELCB / transformers used consistently?												
		Double adaptors and multi-boxes shouldn't be us	bes											
		Is temporary lighting adequate and in good condi												



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			SITE SAFETY INSPECT	10	NS - All Categori	<u>es</u>	Slide 4/5
		Contract:					VIII.
		Area:					
		Inspectors:				Date:	
Ţ	•	Inspe	ection Categories / Issues	Rating	Obse	rvations	
J	Per	sonal Protect	tive Equipment (PPE)				
J	1	Are hard hats	worn as required?				
J	2	Are safety gla	asses / goggles worn when required?				N. San
J	3	Are respirator	rs / masks worn when required?				
J	4		otection worn whe required?				
J	5	overalls, etc.	clothing worn when required? E.g. gloves,				
J	6	Are high visib	oility vests or clothing worn when required?				
J	7		safety footwear worn?				1573 3
J		required?	ntion harnesses available and used when				
J		Are sunhats, required?	sunscreen lotion and shade used when				
K	Cra	nes					
K	1	Do cranes ha	ave current certificates of inspection?				
K	2	Are crane driv	vers qualified?				
K	3		tested and certified?				
K	4	Are qualified direct lifts?	riggers and dog men used to rig and				
K	5	Are lifting pla	ns prepared when required?				
K	7	extended?	et up on level ground with outriggers fully				
K	8	Are cranes of power lines?	perated with booms at least 4 metres from				



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		SITE SAFETY INSPECT	10	NS - All Categories	Slide 5/5
		Contract:			
		Area:			
		Inspectors:		Date:	
		Inspection Categories / Issues	Rating	Observations	
Ţ.T	Spe	ecific Hazard Controls (Not Exhaustive)	~		
Ť					
L	1	Are all machines compliant with current certification? Are all workers and machine operators trained and			
	2	competent for their allotted tasks? (Refer Competency Register)			
L	3	Are all workers outside digger operating zone when digger working?			
	4	Are trenches covered when not in use?			
		Have fall hazards been eliminated and/or appropriate			
L	5	controls implemented?			
L	6	Are propping systems braced, tied and props okay?			
	7	Are safety anchors / static lines for fall prevention adequate?			
L	Ė	Are all vertical reinforcing steel bars capped appropriately?			
L	9	Are crane slings and chains certified? Are housekeeping, lighting, slips, trips and falls			-
L	10	controls adequate?			
L	11	Are gas bottles secured correctly when in use and when in storage?			
L	12	Are flash back arrestors fitted to oxy / acetylene sets?			
L	13	Are powder-powered tools currently certified?			
	14	Are powder-powered tool users certificated and			
1		wearing appropriate PPE? Are powder-powered tools locked away when not in use?			
L		Is bump firing of compressed air nailing guns prohibited?			
	17	Is Worksafe notified in advance for site excavations over 1.5metres?			
L	17	over i.biffettes?			
L	18	Is excavation timbering in place?			
	19	Do excavations and confined spaces have safe access and egress?			
L		Are services identified, located and secured adequately?			
,	24	Are site workers and public adequately protected.			
L	21	Are site workers and public adequately protected? Have emergency procedures been developed,			
L	22	communicated and practiced?			
L	23	Is fire protection comprising extinguishers, hose reels adequate?and evacuation drill, hot work permits			
		Are hazardous substances identified and stored			
L	25	correctly? Are MSDS available? Are permits to work covering specific activities			
		identified through task / hazard analysis, such as			
	26	confined space, excavations, working over water,			

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SITE INSPECTION REGISTER Contract: Date Inspection Inspection Issue Date Type Location Inspector(s) **Issues Requiring Correction Correction Action** Corrected 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56



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SITE	SAFETY II	NSPECTION C	ORRECTI	VE AC	TION RE	<u>EPORT</u>
Contract:						
Contractor:						
Area:					CAR ID:	
Inspection Type:					File:	
Inspectors:					Date:	
	Corrective	Action Item		Date Due	Review Date	Completion Status
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
eneral comments	/ concerns					
Inspe	ctor's signature:			Date:		
Site Supervi	isor's signature:			Date:		

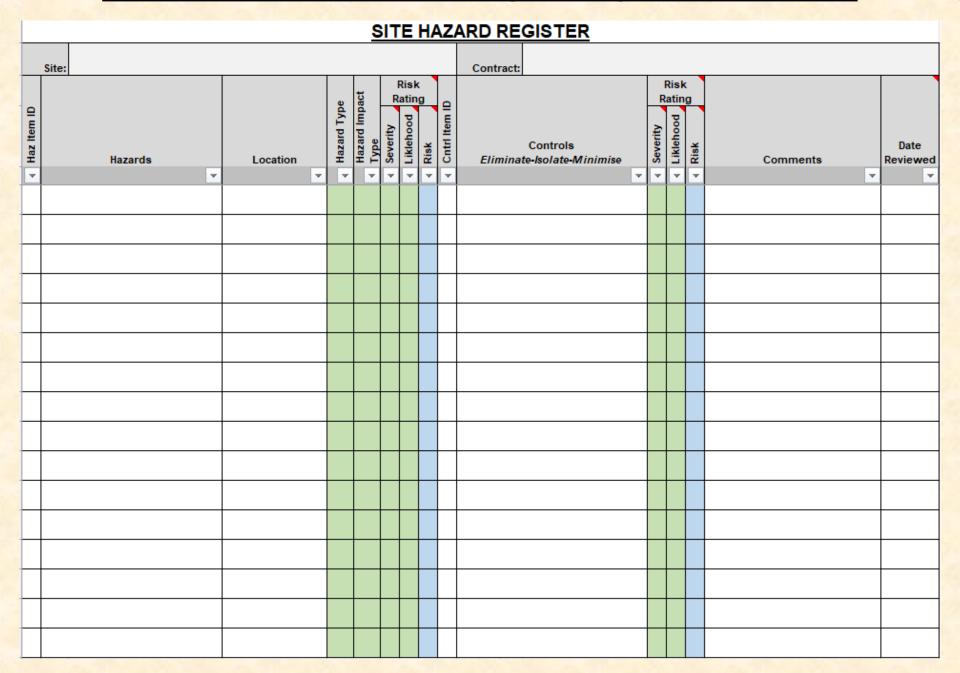




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		SITE INSP	ECT	ION CAR RE	GISTER		
	Contract:						
	Site:						
Item ID	CAR Initiation Date	Inspection Type	No of Corrective Actions	Site Inspector Name	Site Supervisor Name	Area / Location	Date All Corrective Actions Completed
1							
2							
3							
4							
5							
6							
7							
8							
9							
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11							
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		<u> </u>	IAZ	AR	DOUS	SUBST	ANCE REGIS	STER						
	Contract:													
0			Max		Date MSDS	Date		Date	Is	necs	Red	Т	ator	
Item ID	Hazardous Substance	Supplier	Site Qty	Units		Substance on Site	Substance Location	Substance off Site	Overalls	Gloves Safety S	Face Shield	Face Mask	Respirator	Comments
*	v	▼	~	7	~	_	▼	~	T.	Y 7		1		▼
32										+	+	+		
33] [
34] [
35)				
36) c				
37) C		0	0	
38) c		0		
39										J C		0		
40) c		0	0	
41) c		0		
42) c		0	0	
43) c		0	0	
44) c		0		
45										J C		0		
46) c		0		
) c		0		
47) c				
48									\vdash) c	+	+	-	
49									\vdash) c	+	+	-	
50									\vdash) c	+	+	-	
51									\vdash) c	+	+	-	
52									\vdash	_ _	+	+	-	
53					<u> </u>						1	1	二	





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			NOTIF	ABLE	WORK	(S REG	ISTER	
	OnLine Notification:	https://www.w	orksafe.gov	vt.nz/notifi	cations/rep	ort-schedul	ed-or-comp	pleted-work/hazardous-work/
	Contract:							
Item ID		Notifiable Works Description	Date Works Expected	Adv	orksafe ised OnLine	Worksafe Reply Date	Date Works Done	Comments
¥		·		~	~	_	_	▼
1								
2								
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9								
10								
11								
12								
13								
14								
15								
16								



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								INC	CIDENT / ACCIDE	NT EVENT REGI	s.	TER													
Cor	tract:or								Contract:																
																		lnj	jury An						
														lı lı	jury Ty	ype			Inju	Iry Loca	ition	Trea	tment	Outcom	
Event ID	Date of Event	Time of Event	Site Location	Person(s) Involved in Event	Employer of Person(s) Involved	Person Reporting Event	Person Event Reported To	Key Witnesses	Event Summary	Summary of Damage to Buildings / Equipment / Vehicles Etc.	■ No of CAs	Date CAs Cmplt	Injury-Any Type ■ Bruise/Crush	LacerationConcussionBurn	Superficial Injury Sprain/Strain	 Dislocation Foreign Body 	Fracture Amputation Internal Injury	◆ Dermatitis	 Eye Hand/Fingers 	Hip/Leg Shoulder/Arm Foot/Toes	◆ Internal Organs	◆ Back ◆ First Aid ◆ Nurse	Doctor Hospital Lost Time	Days Lost	 ◆ ACC ◆ Worksafe Notified
1																									
2											П			000											
П														000								000			
4														000											
П														000											
6											П			000											
П											Н			000											
8														000											
П											П			000											
9											Н														
10														000	+	+	-								
11											Н			000											
12											Н			000								000			
14											Н			000											
15														000											
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23											П		00	000						000					
24											П		00	000						000					
													0 0	0 0 0	0 0	0 0	Inju	ry Ana	alysis C	olumn 1	Totals	0 0 0	000	0 0	0 0





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					<u>E\</u>	VENT INV	<u>ESTIGATION REGI</u>	<u>STER</u>				
	Contract:											
← Event ID	Date of Event	Incident Report ID	Date Incident Report Rec'd	Date Invstgtn Started	Investigation Subject ▼	Investigator(s)	Investigation Outcome Summary	Corrective Action(s)	Date Invstgtn Cmpltd	Date CA(s) Cmpltd	Date Hazard Register Revised	Meeting
1												
2												
3												
4												
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17												
18												





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			SITE '	<u>VISITO</u>	RS RE	<u>GISTER</u>			
contract:						Contractor:			
Date -	Company	Name	Already Inducted	Now	Visitor Status (no induction)	Location while on Site	Arrival Time	Departure Time	Signature
			0	0					
				0					
				0					
				0					
				0					
			0	0					
				0					
				0					
			0	0					
			0	0					
			0	0					
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			0	0					
			0	0					
				0					
				0					
			0	0					
				0					
				0					



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WORKER COMPETENCY / TRAINING REGISTER Competency verification held on file

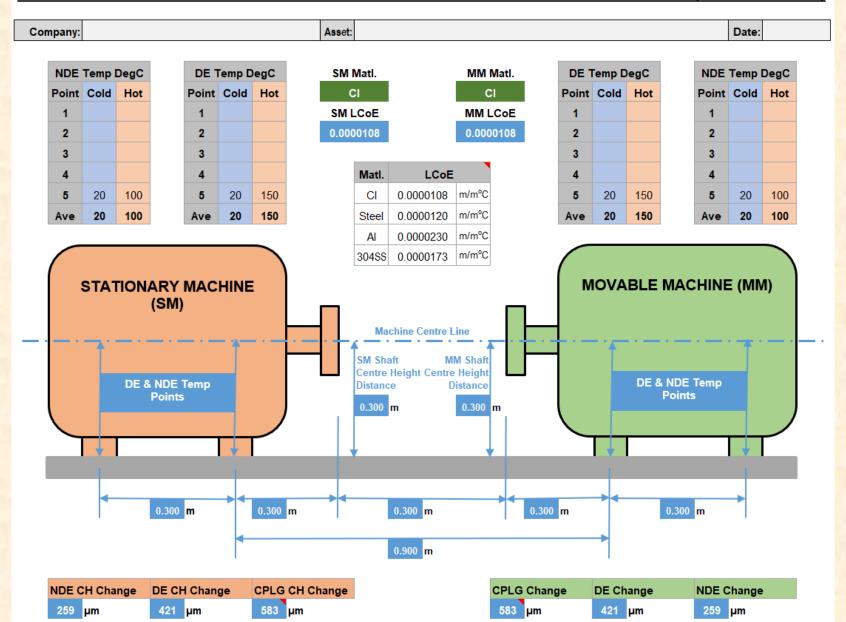


	Er	nployer:																		Comp	petency v	erincauc	on neia c	n me
								ı			Tı	aining Mo	dule / Sk											
US17602 US17688 US17600 US25045 US23960 US23966 US3271 US4647 US64 Date Expiry										Work	place Fire	st Aid	Forklift Operator F Endorsement	Vehicle D Endorsement	Apprvd Handler Test Cert	Ste Safe Safety Mgt SUPG	Site Safe Safety Mgt SUPGR	Site Safe Safety Mgt CMC						
										US6400	US6401	US6402	US18496									_		
Employee Name	Date Cmpltd	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date	Expiry Date											

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MACHINERY THERMAL ALIGNMENT ASSESSMENT TEMPLATE FOR VERTICAL PLANE (APPROXIMATION) Slide 1/3

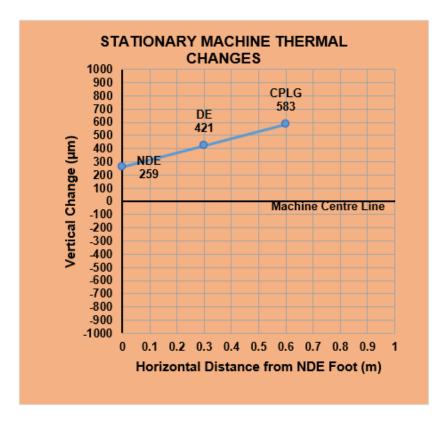


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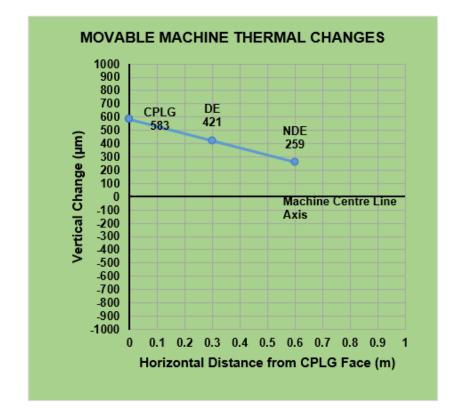
GRAPHICAL REPRESENTATION OF VERTICAL THERMAL CHANGES Slide 2/3

Company: Asset: Date:





SM Thermal Changes			
	Dist	Thermal	
Posn	(m)	Chng (µm)	
NDE		259	
DE	0.300	421	
CPLG	0.600	583	



MM Thermal Changes			
	Dist	Thermal	
Posn	(m)	Chng (µm)	
CPLG		583	
DE	0.300	421	
NDE	0.600	259	

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GRAPHICAL REPRESENTATION OF ALL VERTICAL THERMAL CHANGES & MOVABLE MACHINE ADJUSTMENT ESTIMATES Slide 3/3



