Credit Account Application

Company DETAILS:

Name and Address	
Nature of Business	
Number of Employees	
Contact No	
Email Address	

Please respond to the following:

1	Do you have a Health & Safety Policy? Please provide a current copy.		Yes If 'Yes' please provide details on a separate sheet.	
2	State how many of the following you have reported under RIDDOR in the last 3 years:			
	Year 1	Year 2	Year 3	This year to date
Specified Injuries				
Over 7 Day Injuries				
Dangerous Occurrences				
Reportable				
Diseases				
3	Have you been se improvement not last 3 years?	•	Yes If 'Yes' please provide details on a separate sheet.	
4	Have you been pr Health & Safety o years?	osecuted for a ffence in the last 3	Yes If 'Yes' please provide details on a separate sheet.	
5	Please provide 2 examples of work carried out in the last 12 months, where the risks are comparable with those of the work for which you wish to be considered:			
	1.		2.	



6	Are you a member of or accredited by a trade organisation?	Yes If 'Yes' please provide details and copies of the certificates	No
7	Please enclose examples of site-spe the past 12 months.		nts completed in
8	Please enclose examples of site-spe in the past 12 months.	cific method staten	nents completed
9	Please enclose copies of your insural letters for: Public Liability Product Liability (where apprenance) Employers Liability (where apprenance) Professional Indemnity (where	opriate) opropriate)	nedules or brokers
10	Please provide 2 references from similar jobs completed in the past 12 months:		
	Reference 1	Reference 2	
11	Please describe your onsite arranger ensure the task is completed to the s		g your staff to
12	Please provide details and enclose e CSCS cards	vidence of staff cor	npetencies, e.g.
13	13 Please provide the name, qualific internal Health & Safety Coordinator please provide full details: - Internal: – External: –		



14	Please provide details of your co-operation and co-ordination arrangements when working on a multi-disciplined job with other trades.
15	Do you issue your staff with appropriate personal protective equipment for the job?
	Yes If 'Yes' please provide issue records
	No If 'No' please justify the reasons for not adhering to the requirements of the Personal Protective Equipment at Work Regulations 1992 as amended.
16	How do you ensure all equipment used on site is well maintained and safe for use? (Please also enclose maintenance records or hire invoices where appropriate)
17	Do you appoint sub-contractors?
	Yes No If 'Yes' please provide details of how you assess the competence of your subcontractors prior to appointment.
18	How do you monitor the performance of your sub-contractors?
	Weekly checks



Name:	
Position:	
Signature:	
Date:	

4 Subcontractor PQQ