



## CONTRACTOR COMPLIANCE FILE ASSESSMENT CHECKLIST

Date of inspection/ Evaluation: \_\_\_\_\_

|  |  |
|--|--|
| Client   |  |
| Employer (Principal contractor)                    |  |
| Registered name of the enterprise                  |  |
| Trade name of the Enterprise                       |  |
| Company Registration No                            |  |
| SARS registration No(PAYE)                         |  |
| UIF registration No                                |  |
| COIDA registration no                              |  |
| Relevant SETA for EEA purpose                      |  |
| Industry sector                                    |  |
| Bargaining Council                                 |  |
| Contact person & position                          |  |
| Contact number                                     |  |
| Site Address                                       |  |
| Postal Address                                     |  |
| Chief Executive Officer                            |  |
| Chief Executive officer's email and contact number |  |
| Construction Manager                               |  |
| Health and Safety Representative                   |  |
| Activities/ Service rendered                       |  |
| Commencement date                                  |  |
| Completion date                                    |  |
| Site Phone   |  |
| Total number of employees on site:                 |  |
| Female   |  |
| Male   |  |
| People with disabilities                           |  |



| CONTRACTOR   | Complying | Not Complying<br>(i.e. Comments) | Not<br>Applicable |
|--|-----------|----------------------------------|-------------------|
| 1. Site Specific Organogram of reporting structure.<br>This document must provide all persons appointed in terms of<br>OHS Act No. 85 of 1993 including contact details. (rev, date, approval)   |           |                                  |                   |
| 2. Contractor scope of work information (Company Profile)  |           |                                  |                   |
| 3. Notification of Construction Work to the Department of Labour: Document to display required information as per OHS Act No.85 of 1993 – Construction Regulations Annexure A, Must carry the stamp of acceptance from the Department of Labour ( <i>if applicable</i> ) |           |                                  |                   |
| 4. Application for a permit to do construction work ( <i>if applicable</i> )   |           |                                  |                   |
| 5. Valid Letter of Good Standing with FEM/WCA:<br>And proof of relevant insurances to carry out work.  |           |                                  |                   |
| <b>MANAGEMENT PLANS</b>  |           |                                  |                   |
| 6. Copy of reference documents:<br>Health & Safety, Security, Quality, Environmental, and other applicable Specifications<br>Including a signed register of communication to Managers, Supervisors & Safety Officers   |           |                                  |                   |
| 7. Approved Contractor Execution Plan correlating with Specification provided by Transnet (i.e. Approved health and safety plan, environmental plan, security plan etc.)   |           |                                  |                   |
| 8. Contractors Health and Safety Policy  |           |                                  |                   |
| 9. Site Specific Emergency Plan  |           |                                  |                   |
| 10. Contractors Traffic Management Plan (if applicable)  |           |                                  |                   |
| 11. Procedure for handling Hazardous Chemical Substance's and Applicable Safety Data Sheet ( <i>if applicable</i> ).   |           |                                  |                   |
| <b>APPOINTMENTS</b>  |           |                                  |                   |
| 12. Fully completed appointments of the following (depends on the scope of work) but not limited to:   |           |                                  |                   |
| • Sec. 16(2) – Delegated Authority (Assistant to the CEO)  |           |                                  |                   |
| • CR 8(1) – Construction Manager   |           |                                  |                   |
| • CR 8(7) – Construction Supervisor  |           |                                  |                   |
| • CR 8(8) – Assistant Construction Supervisor  |           |                                  |                   |
| • CR 8(5) – Construction Safety Officer  |           |                                  |                   |
| • CR 9(1) – Risk assessment  |           |                                  |                   |
| • CR 10. (1)(a) – Fall Prevention Planner ( <i>if applicable</i> )   |           |                                  |                   |
| • CR 10.(2)(b) (fall risk) Physical & Psychological fitness  |           |                                  |                   |
| • CR 23.(d)(k) – Vehicle operator and Inspector  |           |                                  |                   |
| • GSR 3.4 – First aider  |           |                                  |                   |
| • CR 29 (h) – Fire Fighter   |           |                                  |                   |
| • Sec 24, GAR 9(2) – Incident Investigator   |           |                                  |                   |
| • CR 13(1)(a) – Excavation Supervisor  |           |                                  |                   |
| • CR 28(a) – Stacking and Storage Supervisor   |           |                                  |                   |
| • CR 12(1) – Temporary works designer  |           |                                  |                   |
| • CR 14(1) – Demolition work supervisor  |           |                                  |                   |



|   |  |  |  |
|---|--|--|--|
| • CR 16(1) – Scaffolding work supervisor  |  |  |  |
| • CR 17 (1) – Suspended platform work supervisor  |  |  |  |
| • CR 18(1)(a) – Rope access supervisor  |  |  |  |
| • CR 19(8)(a) – Material host Inspector   |  |  |  |
| • CR 20(1) – Bulk mixing plant supervisor   |  |  |  |
| • CR 21(2) – Explosive actuated fastening devices inspector   |  |  |  |
| • Sec 17(1) – SHE Rep (more than 20 employees)  |  |  |  |
| • GSR 13(a) – Ladder Inspector<br>An abbreviated CV of the above appointed persons shall be attached to the appointment.<br>Competency certificates will also be attached as required in specifications   |  |  |  |
| <b>13.</b> Elevated work training (Rescue/ Safety harnesses) – accredited Training ( <i>If applicable</i> )   |  |  |  |
| <b>14.</b> Fall Protection Plan by competent person / Rescue Plan ( <i>If applicable</i> )  |  |  |  |
| <b>15.</b> Contract/Project Specific Risk Assessment indicating the full scope of work and risk profile – High risk task inventory registers to be attached.  |  |  |  |
| <b>16.</b> Risk Assessment (HIRA), Method Statement, Safe Work Procedure to be generated for each specific task to be performed on the contract/project i.e. Site establishment, confined spaces, working at heights, working near water, excavations etc. Note: before establishment they can supply what they will start with – site establishment, fencing, clear & grub...so only request what is relevant at the time. |  |  |  |
| <b>17.</b> PPE Policy and most recent issue register.   |  |  |  |
| <b>INDUCTION</b>  |  |  |  |
| <b>18.</b> Induction application forms completed for every employee of the contractor performing work on site; The following shall be attached:   |  |  |  |
| • Employee Dossier with applicable documentation;   |  |  |  |
| • Proof of site specific induction;   |  |  |  |
| • Copy of ID Document;  |  |  |  |
| • Legal Letter of Appointment;  |  |  |  |
| • Proof of competence i.e.: Artisans, drivers, operators etc.;  |  |  |  |
| • Valid medical certificate of fitness done by an Occupational Health Practitioner (i.e. Annexure 3 for construction work)  |  |  |  |
| <b>REGISTERS</b>  |  |  |  |
| <b>19.</b> Copy of equipment registers to be used with copy of each item's inspection checklist. The registers are not limited to the following, depends on the scope of work:  |  |  |  |
| • Site visitors register  |  |  |  |
| • Excavation Inspection Register  |  |  |  |
| • Hand tools Inspection register  |  |  |  |
| • Barricading Inspection Register   |  |  |  |
| • Traffic Inspection Register   |  |  |  |
| • Mobile Toilet Inspection Register   |  |  |  |
| • Daily Risk Assessment and Toolbox Talk  |  |  |  |
| • PPE Inspection Register   |  |  |  |
| • First Aid kit Inspection Register   |  |  |  |



|  |  |  |  |
|--|--|--|--|
| • Fire Fighting Equipment Register   |  |  |  |
| • Portable electrical Equipment Register   |  |  |  |
| • Pneumatic Tool Register  |  |  |  |
| • Compressor Checklist   |  |  |  |
| • Ladder Inspection Register   |  |  |  |
| • Vehicle Inspection Register  |  |  |  |
| • Working at Height Equipment Register   |  |  |  |
| <b>INCIDENT/ACCIDENT MANAGEMENT</b>  |  |  |  |
| <b>20.</b> Incident /Accident Management Procedure including reporting, recording and investigation of incidents and accidents |  |  |  |
| <b>21.</b> Register of first aid injuries  |  |  |  |
| <b>22.</b> Register of reportable injuries to the Provincial Director  |  |  |  |
| <b>OTHERS</b>  |  |  |  |
| <b>23.</b> Section 37(2) mandatory agreement between client - contractor and contractor - sub contractor. As well as:          |  |  |  |
| • CR 5.1(k) Principal Contractor appointment   |  |  |  |
| • CR 7(1)(c)(v) Sub Contractor appointment   |  |  |  |
|  |  |  |  |
| <b>24.</b> Training Matrix (Management, Supervisors and Employees)   |  |  |  |
| <b>25.</b> Copy of the OHS act and its Regulations , COID Act Regulations  |  |  |  |

| CONTRACTOR'S COMPLIANCE FILE REVIEW |                 |             |           |
|-------------------------------------|-----------------|-------------|-----------|
| Date                                | Print Full Name | Designation | Signature |
|                                     |                 |             |           |
|                                     |                 |             |           |
| <b>Status</b>                       |                 |             |           |
| Approved                            |                 |             |           |
| Not Approved                        |                 |             |           |
| <b>Reasons for not approving</b>    |                 |             |           |

