

Template Identifier	240-43921898	Rev	5
Document Identifier	240-106084699	Rev	2
Effective Date	May 2021		

## Safety Requirements- High Risk Category

Ref.	OHS Tender Returnable	Submission  Y = Yes  N= No  N/A = Not applicable	<u>Comments</u>
1.	Annexure B		
	Is the acknowledgement of <b>Eskom's OHS</b> legal and other requirements form signed by the CEO/MD and 2 witnesses?		
2.	<b>OH&amp;S Organogram-</b> Including names and appointment reference, to be approved by CEO/MD.		
3.	Occupational, Health and Safety Plan (OHS plan)  Must address the project /scope of work OHS risk(s) and aligned with the health and safety specification or requirements (Numbering must align to the left-hand side numbers in the SHE specification).  Next review date to be included and to be signed by the CEO/MD of the company.		

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4.	Baseline Risk Assessment (BRA) Identification, assessment and management of OHS risks related to the scope of work. The methodology and applicable risk matrix used for the risk assessment must be provided together with the BRA. (Driving to be included) Next review date to be added and to be signed by CEO/Director)		
5.	Valid Letter of Good Standing (COIDA or equivalent) The letter of good standing must state the relevant services rendered by the company, e.g. Electrical related construction work in line with the Scope of Work applicable for this tender.		
6.	OHS policy signed by CEO  The submitted policy document must comply to OHS Act Section 7. To be signed by the Owner/CEO/MD and have the next review date.		

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7.	<ul> <li>OHS Competency: Proof of the training certificates and appointment letters for each of the following: NB Accreditation certificates to be provided by the training service provider to the contractor for each competency.</li> <li>Section 17 Health and Safety Representative (Appointment if not yet trained)</li> <li>GSR 3(4) First Aid Training</li> <li>CR 29(h&amp;i) Fire fighters</li> <li>CR 9(1) Risk Assessor</li> <li>CR 8(7) Construction Supervisor with Supervision Certificate and MV/LV line Construction</li> <li>CR 8(5) Safety Officer (Registered with SACPCMP)</li> <li>CR 10(1) Fall Protection planner/developer</li> <li>Fall Rescuer (Training Certificate only)</li> <li>GAR 9(2) Incident Investigator</li> </ul>		

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8.	Medical Fitness Certificate (Including Annexure3 template) To be done by the Occupational Health Practitioner/Nurse/Doctor (Minimum of 3)		
9.	<b>Fall Protection Plan as per CR 10 (With Rescue Plan &amp; Fall Risks)</b> Next review date to be included, to be signed by the fall protection planner & CEO/MD of the company		
10.	Substance Abuse Procedure or Policy  Policy to be signed by the CEO/MD		
11.	Costing for Health and Safety management  (The cost should be broken down not provided as a lump		
	<ul> <li>The costing must be based on the overall scope of work/service to be performed.</li> </ul>		

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