

Subcontract Operator Competency Attestation & Declaration

Document Number: D02.02

1 Project/Site: Purpose

This information is aligned with the requirements of the Fletcher Subcontractor Agreement and is designed to provide a guideline for capturing competence of the subcontractors equipment operators engaged to work on a Fletcher site.

2 Process

All operators will be identified at site induction and the information on this form must be available prior to the operator commencing work.

All operators will be given the opportunity to read and understand the Fletcher Operator Guidelines and company safety procedures with a nominated company representative prior to commencing work on site. All operators will be required to sign acknowledging receipt and understanding of the company requirements.

3 Competency Information

Operators					
Employer					
Operating Experience (Yrs)					
Qualifications					
Licences					
Recent Experience (within last 2 years)	Period (mth/yr)	Project Details	Type of Equipment	Type of Experience	Verified by Principle
		<i>Site/Employer/ Contractor</i>	<i>e.g.12t Excavator</i>	<i>e.g. Drainage</i>	

Please **Tick** the applicable below

Operating Environment Experience/Capabilities						Verified by Principle
High Risk	Steep Terrain	<input checked="" type="checkbox"/>	High Risk Operations	<input type="checkbox"/>	High Risk Conditions	<input type="checkbox"/>
Medium Risk	Uneven Terrain	<input type="checkbox"/>	Complex Operations	<input type="checkbox"/>	Challenging Site Conditions	<input type="checkbox"/>
Low Risk	Flat Terrain	<input type="checkbox"/>	Basic Operations	<input type="checkbox"/>	BAU Site Conditions	<input type="checkbox"/>

Do you have any medical conditions or are you on any medication: (YES / NO) if **YES** please specify below

Medication:

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Medical Conditions:

Any Other Relevant Information

Status: Issued for use

Controlled Form

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Subcontractor Principal Declaration

I.....(Manager) hereby certify that (Employee)is deemed competent to operate (Equipment).....on the

(Project)to conduct as part of the agreed scope of work.

I declare that the Employee Above;

- Has been assessed and is competent to undertake the work specified above
- Holds the relevant qualifications, tickets and/or licenses to undertake this work
- Has demonstrated relevant knowledge, skills and experience to undertake this work in a range of environments, in accordance with relevant legislative requirements

(Company Name): agrees:

- To ensure the above Employee continues to meet the competency and qualifications requirements described in the above declaration at all times while they perform the work specified above for or on behalf of the above Company
- To hold copies of all assessment files and related information regarding the above Employee for at least 3 years
- Thatand the Business has the right to review/audit contractor's files and information for compliance purposes and
- To indemnify and keep indemnified and the Business from all claims or loss arising because of any inaccurate declaration of failure by (Company Name) to ensure the
- Employee above is competent and qualified to perform work specified above.

I certify that above mentioned worker is qualified (where required), received appropriate training and has the experience, knowledge and skills necessary to competently perform the required work on the project.

Subcontractor Principle Name:

Signature:

Date:

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Contact Number:

I certify that I am qualified (where required), have received appropriate training and have the experience knowledge and skills to perform the work required on the project of site.

Worker Name:

Signature:

Date: