

	Function: WHS	Version Number: 3
	Policy Number: WHS08-005	Adapted: MAY 2019
	Frequency of Review: Triennially	Last Review: OCTOBER 2025 Next Review: OCTOBER 2028

CONTRACTOR PRE QUALIFICATION

Contractor Details			
Company / Business name:			
ABN (Australian Business Number):			
Street Address:			
Postal Address:			
Principal Contact Person			
Name:		Phone	
Mobile Phone:		E-mail:	
Site Supervisor			
Name:		Phone	
Mobile Phone:		E-mail:	
Work Health and Safety Contact			
Name:		Phone	
Mobile Phone:		E-mail:	

Subcontractors			
Will you be engaging any subcontractors to perform all or part of the contracted work? ☐ Yes ☐ No If yes, please provide the details below:			
Business Name		Contact Person	
Mobile Phone		E-mail	

Business Name		Contact Person	
Mobile Phone		E-mail	

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Industry/Trade					
Accounting		Excavation/Trenching		Painting & Decorating	
Air-conditioning / Refrigeration		Fencing		Pest Control	
Arboriculture/Tree Removal		Footpath		Plant Hire	
Asbestos ID/Removal		Gas		Plumbing	
Automotive Air Cond		General Building		Professional Services	
Bitumen Works		General Electrician		Road Construction	
Building Maintenance		Kerbing		Waste Management	
Cleaning		Landscaping		Weed Control	
Concreting		Line Marking		Welding	
Confined Space		Major Civil Works		Other: (please list below)	
Electrical		Minor Civil Works			
Elevated Work Platform (EWP)		Mowing/Slashing			

CONTRACTOR CHECKLIST AND DECLARATION

Contractors must provide the following documentation listed as mandatory. The documentation listed as additional must be provided if relevant to the works or requested by the organisation.

Mandatory Documents Requested
☐ Proof of Public Liability Insurance Cover – minimum \$20,000,000 (i.e. copy of your Certificate of Currency of Insurance - a tax invoice or renewal notice will not suffice. Please request a Certificate of Currency from your insurer.)
☐ Evidence of current ReturnToWork SA registration (Sole Traders exempt)
☐ SOLE TRADERS – Proof of Personal Accident Insurance / Professional Indemnity Insurance
☐ Copy of worker licences, competencies and certifications relevant to the works (e.g. White Card, Work Zone Traffic Management, drivers' licences, machinery licences, trade licences)
☐ Identification of person within your organisation responsible for work health and safety
☐ Copies of work health and safety policies and/or procedures relevant to the work to be performed
☐ Evidence that hazards relating to work activities are identified, assessed and controlled (e.g. hazard identification list or other documentation: risk assessments, JSAs and, where relevant, SWMS and WHS Management Plan)

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Additional Documents (if relevant to the works/company or requested by the organisation)

- ☐ Work Health Safety Policy and summary of WHS procedures and instructions or processes relevant to the works to be provided (e.g. WHS management system)
- ☐ Sample copies of Safe Operating Procedures/Safe Work Instructions for the works to be provided
- ☐ Incident reporting and investigation process, including a sample incident report form
- ☐ Copy of plant registration e.g. cranes, elevated work platform
- ☐ Training or skills matrix of personnel to be engaged to perform the work (and an explanation of how this is maintained)
- ☐ Emergency response procedures and/or management plan

This is to certify that I have provided the above information as indicated.

_____ (Company/business name) agrees to perform the work within the remit of the Work Health and Safety legislation, relevant model Codes of Practice, industry standards and in accordance with reasonable requests by the organisation.

Authorised officer: _____

Signature: _____

Date: _____