CHARLOTTETOWN

Contractor List of Documentation

Contractor Company Name:				
	YES	**NO**	**Date Received**	**Comments**
Copy of Safety Program (Up to date & signed)				
Copy of Safe Work Practices & Job Procedures				
Copy of Training Records Including WHMIS				
Proof of Contractor Company Orientation.				
Name of on site Safety Rep.				
Names of on site Personnel Trained First Aid				
Appropriate First Aid Kit and Eyewash station				
Daily Completed Hazard Assessment				
Weekly Site Safety Inspections				
Daily Toolbox Talks				
Documentation of MSDS's				
Copy of Emergency Contacts				
A Completed Site Specific Safety Plan				
Letter of good standing from the Workers Compensation Board of Prince Edward Island.				
Copy of Electrical Program				
Copy of Hot Work Program				