

Approved Site Induction Form

NAME OF PROJECT/SITE

PROJECT NUMBER

DATE

Newcold-Truganina

3010-05-000

2017-02-27 06:56:45

Induction Number

Access Authority Issued

0061

Helmet Sticker/Induction Card/Swipe Card

EMPLOYER DETAILS

Employer/Business Name: Dexion

Phone Number: 0438354987

Employer Contact Person: Scott Gannaway

Email Address: scottg@dexion.com.au

Business Address: Suite 99 Pirrama Road Pyrmont NSW 2009

PERSON INDUCTED DETAILS

Your First Name: Shashank Final

Your Surname: Hello

Your Date of Birth: 2017-02-02

Your Contact Number: 2142424

Your Occupation: sdgsdg

Employee Position: Site Manager

Your Email Address: sa@h.com

Your Address: dgdf35345

EMERGENCY CONTACT PERSON

Contact Persons Name: Saagr

Their Contact Number: 24214325

Relationship To You: Brother

MEDICAL CONDITIONS

Do you have a medical condition that poses a health or safety risk to you or others on site? e.g. Diabetes, Deafness, Heart/Lung Condition,

Allergy etc. Yes

Hiii

COMPETENCY CERTIFICATES / PROOF OF IDENTITY

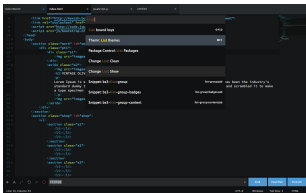
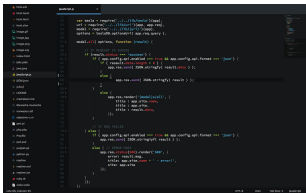
Date Issued: 2017-02-15 Name Of Induction Training Provider: sasdgsd

General Construction Induction Card: 25235435

Upload General Construction Induction Card, Driver's License, Trade Certificates, Prescribe Occupations, Licenses, First Aid Certificate, etc. related to your work on this site e.g. Electrician, Plant Operator, Crane, Rigger, First Aider, Demolition etc. Upload Licenses.

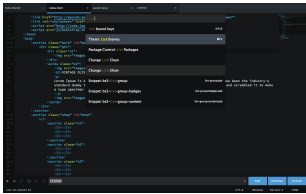
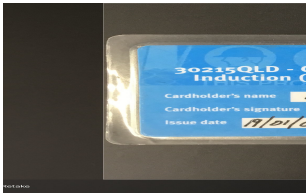
General Construction Induction Card Front:

General Construction Induction Card Back:



Driver License Front:

Driver License Back:



Comeptency/ Certificates:



INDUCTION TOPICS

1	Additional Inductions i.e. Visitor, Ceiling, Client.	Yes
2	What We are Building - Description. Expected Duration & Completion Date. Site Ph. No. etc. Site's Hours.	Yes
3	Site Management Team - Project Director and Site Manager. Foremen. Site Ph. No. etc. Site Safety Advisor (SSA).	Yes
4	Site Layout - Offices, Amenities, First Aid, Parking, etc. Deliveries To Site	Yes
5	Policies - WHS, Quality, Environment. Outline of CMP.	Yes
6	Essential Health & Safety Requirements for site.	Yes
7	Site Access & Security	Yes
8	Site Rules -e.g. Civil Language & Behaviour	Yes
9	Disciplinary Procedures -	Yes
10	Drugs and Alcohol -	Yes
11	Smoking Policy, Designated Smoking Areaâ€™s	Yes
12	Project Consultation & Communication	Yes
13	Site Specific Hazards	Yes
14	Work Method Statement Requirements	Yes
15	Site Permits	Yes
16	Live Services	Yes
17	Underground Services	Yes
18	Mobile Plant	Yes
19	Working at Heights	Yes
20	Safety Harnesses.	Yes
21	Ladders	Yes
22	Mobile and Fixed Scaffold.	Yes
23	Electrical -Portable equip/tools tested and tagged.	Yes
24	Fire Prevention	Yes
25	Hazardous Substances & MSDS	Yes
26	Manual Handling	Yes

27	Minimum PPE -Hard Hats, Steel Capped Boots,Protective Clothing Short Sleeve Shirt,High Visibility Vests.	Yes
28	Safety Signs & Barricades	Yes
29	Emergency Procedures - Evacuation Procedures. Emergency Contact Details. Fire Fighting Equipment, etc.	Yes
30	Incident Reporting Requirements - Accidents Dangerous Events. Near Misses Hazard	Yes
31	First Aid Facility	Yes
32	Amenities, Toilets & Drink Stations	Yes
33	Environmental Compliance	Yes

PRIVACY NOTIFICATION:

The personal information you have provided may be used for the purpose of contacting the person you have nominated in the event of an emergency. From time to time the information may be supplied to others such (as medical officers, ambulance officers) involved with the outcome of an emergency or medical situation. All disclosures will be subject to the provisions imposed by the Privacy Act 1988.

INDUCTION DECLARATION:

I **Shashank Final Hello** certify the following:

=> All information givenby me verbally during the induction and written by me on this form is true and correct.

=> I understand my Work Health and Safety, Quality and Environmental obligations and responsibilities on this project as explained to me during the Site Specific Induction and as ticked by meabove.

=> I have all the relevant licences, experience, trainings, qualifications,knowledge and skills to do the tasksallocated to me on this project competently and in a safe way.

=> I am medically fit to perform the respective tasks I am required to undertake while on site.

Your Signature

Hello

Declaration Date

2017-02-27

PERSON CARRYING OUT INDUCTION

Induction Number

1

Name

Pieter