

Occupational Health and Safety Act, No. 85 of 1993

APPOINTMENT AS RISK ASSESSOR

I, , representing invested in me to appoint persons in terms of the Occupational Health and Sa of Construction Regulation 9(1) to the Act, hereby appoint you,	, by the powers fety Act, and in terms
as Risk Assessor.	
Your appointment will be with effect from supercedes any appointments in terms of the same provision you may have.	until further notice and
In terms of this appointment, your area of responsibility will be as follows: , at	

You are herby appointed to conduct risk assessments on the abovementioned construction project, and without detracting from this, you are to ensure the risk assessment include the following, as per Regulation 7 (1):

- (a) the identification of the risks and hazards to which persons may be exposed to;
- (b) the analysis and evaluation of the risks and hazards identified:
- (c) a documented plan of safe work procedures to mitigate ,reduce or control the risks and hazards that have been identified;
- (d) a monitoring plan; and
- (e) a review plan.

You are to ensure that you are familiar with your responsibility, as outlined above, and if you have any queries in this regard, you are to bring it to the attention of the person you report to, or to myself. You will be provided with all the means necessary to enable you to fulfill your responsibilities in terms of this appointment.

You are to take all reasonably practicable measures, within your area of responsibility, to ensure the general safety and health of persons, and the enforcement of health and safety requirements as may be imposed by the Company, the applicable Government Department or the Act and Regulations. If you, for any reason, are unable to take such measures, you are to bring this to the attention of the person you report to, or to myself.

You are to maintain a good working knowledge of the provisions of the Act and Regulations made in terms of the Act, as well as other legislation which may have relevance to your responsibilities.

You are to ensure that you are familiar with all Company health and Safety standards. This will include, but is not limited to instructions, safe working procedures, general health and safety rules, and protective equipment and clothing requirements.

You are to ensure that you are familiar with all permits, permissions and exemptions as may be imposed by external authorities including, but not limited to, the Department of Labour. You shall assist in ensuring that, as may be applicable, the same documents are kept up to date at all times.

Kindly confirm the acceptance of this designation and understanding of the duties involved by signing this letter of designation and returning it to me. Please keep a copy for your records.

Signature of Appointor	Signature of Appointee
Date	Date

ABBREVIATED CV

Name: Address:		Surname: Qualification	Surname: Qualifications:		
. <u>D Numbe</u> Number of	<u>r:</u> years in industry:				
<u>Year</u>	Time Period	Contract	<u>Company</u>	<u>Position</u>	
With	ı my signature be	elow I declare that the	e supplied informa	tion is the truth.	
Signatur	e:	<u>Date:</u>			