

### Appendix 33

#### **Al Khodari Safety Questionnaire for the Selection of Subcontractors.**

1. Attach a copy of your last 3 years insurance policy that show the rate and the coverage period.
2. Provide the following information for the last 3 years:
  - 2.1. Number of lost workday cases\_\_\_\_\_
  - 2.2. Number of restricted workday cases\_\_\_\_\_
  - 2.3. Number of Fatalities\_\_\_\_\_
  - 2.4. Number of minor first aid cases\_\_\_\_\_
3. List of manual/Non Manual hours worked for the last 3 years  
Manual\_\_\_\_\_ Non Manual\_\_\_\_\_
4. Type of work performed over the last 3 years\_\_\_\_\_
5. Do you conduct Safety inspections on your job sites \_\_\_\_\_  
If yes who conducts this inspection \_\_\_\_\_
6. Are all accidents, large or small required to be reported\_\_\_\_\_

\_\_\_\_\_

7. List key personnel planned for this project. 1 Name's 2. Position

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8. Do you have a written safety program, If so attach a copy.

9. Do you hold tool box safety meetings for your employees? \_\_\_\_\_

If so how often, weekly, monthly when needed? \_\_\_\_\_

Do you document these meetings? \_\_\_\_\_

10. Do you require the following personal safety equipment to be used by your employee's

- a. Hard hat
- b. Safety shoes or boots
- c. Gloves
- d. Safety Glasses
- e. Masks

11. Do you have a safety incentive program? If so describe.

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12. Name, title and contact details of your company safety representative

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It is certified the information provided is correct

Signed\_\_\_\_\_

Company\_\_\_\_\_