

Section 1: Risk Assessment Details

Project Name

Communication

Department

testings,test2,New dept,TestNew,fdfd,dsd,neweewew,

Start Date

09/03/2018

End Date

09/25/2018

Country

Afghanistan

Classification

amber

Approving Manager

Dinesh

Task Description

Test

Itinerary Description

Tewttt

Section 2: Traveller Details

Primary Traveller:

Name

Dinesh s

Email

dineshdazzler93@gmail.com

Mobile Number

+919500525457

Emergency Name

der

Email

ds@gmail.com

Mobile

919500525457

Relationship

fdf

Alternative Contact

erffd

Email

fd@gmail.com

Mobile

919500525457

Relationship

fdfff

Nationality

India

Passport Number

85687458

Valid From

2018-04-16

Expiry

2018-04-30

Nationality

Bahrain

Passport Number

123454

Valid From

2018-04-18

Expiry

2018-04-16

Nationality

Bangladesh

Passport Number

2443

Valid From

2018-04-18

Expiry

2018-04-23

Other Traveller:

Name		Email	Mobile Number
<input type="text" value="Prasasth S"/>		<input type="text" value="prasanth.inoble@gmail.com"/>	<input type="text" value="+919677355282"/>
Nationality	Passport Number	Valid From	Expiry
<input type="text" value="Bangladesh"/>	<input type="text" value="gfg"/>	<input type="text" value="2018-07-03"/>	<input type="text" value="2018-07-19"/>
Emergency Name	Email	Mobile	Relationship
<input type="text" value="sdsd"/>	<input type="text" value="d@gmail.comsds"/>	<input type="text" value="919894748888"/>	<input type="text" value="dsd"/>
Alternative Contact	Email	Mobile	Relationship
<input type="text" value="sddsds"/>	<input type="text" value="dsds@fd.com"/>	<input type="text" value="919894748889"/>	<input type="text" value="fdf"/>

Section 3: Logistics

Supplier Name		Service Provided	
<input type="text" value="CXCX"/>		<input type="text" value="Local Contact"/>	
Number		Email	
<input type="text" value="undefined"/>		<input type="text" value="undefined"/>	
Country	City	Cost per day	Currency
<input type="text" value="null"/>	<input type="text" value="null"/>	<input type="text" value="null"/>	<input type="text" value="null"/>
Sourcing			
<input type="text" value="other"/>			

Other Information
testingggg

Supplier Name		Service Provided	
<input type="text" value="CXCXCX"/>		<input type="text" value="Local Driver"/>	
Number		Email	
<input type="text" value="undefined"/>		<input type="text" value="undefined"/>	
Country	City	Cost per day	Currency
<input type="text" value="null"/>	<input type="text" value="null"/>	<input type="text" value="null"/>	<input type="text" value="null"/>

Sourcing

other

Other Information

test local driver

Supplier Name

cccccccccccccccccccccccccccccccc

Service Provided

Accomodation

Number

undefined

Email

undefined

Country

null

City

null

Cost per day

null

Currency

null

Sourcing

Sourced without recommendation

Recommended by

dssdsdsd

Section 4: Communications

Team Contacts

Name	Local Number	IMEI
<div>fdf123</div>	<div></div>	<div></div>

Emergency Details

Name	Role	Number	Email
<div>fdf</div>	<div></div>	<div></div>	<div></div>

Check In Schedule

No.of Check-ins	Timezone
<div>14</div>	<div>-09:30 Taiohae</div>

Call In Times

0000,0200,0400,0600,0800,1000,1200,1400,1600,1800,2000,2200

2200,2200

Point of Contact

null

Mobile

null

Email

null

Detail an Overdue Procedure

null

Section 5: Contingencies

Medical Provision

gfgf

Method of evacuation

fdfd

Local hospital information

null

Medical Evacuation Company

null

First Aid Kit:

Personal Protective Equipment :

Satelite Phone

null

Tracker Id

null

Section 6: Any Other Information

Additional risks identified

null

Additional information provided

null