**CONTRACTOR WORK STATEMENT FORM**

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| --- | --- | --- | --- | --- | --- |
|  | **PART I** | | | | |
| **A** | **TO BE COMPLETED BY THE CONTRACTOR** | | | |  |
|  | **Work Title:** | Hashtag Project | | |  |
|  | **Date & Time of commencement:** | 1 Nov 2022 | | |  |
|  | **Date & Time of expected completion:** | 31 March 2023 | | |  |
|  | **Location of work:** | SIT@Dover,Customer Site at 71 Tannery Lane #05-02 | | |  |
|  | **Submitted by:** | 14 Nov 2022 | | |  |
|  |  | **Name & Signature of Contractor’s Rep** | | | **Date** |
| **B** | **ENDORSEMENT BY SIT PROJECT MANAGER (PM)/ HOST** | | | | |
|  | **Document received:** |  | | |  |
|  | **Provision of *Safety Orientation for Contractors (eDoc)* (refer to** [**link**](https://sitsingaporetechedu.sharepoint.com/sites/SH/Training%20Materials/Forms/Group%20View.aspx)**):** | **Completed on** |  | |  |
|  | **Reviewed by:** | Kang Liat Chuan 14 Nov 2022 | | |  |
| 11 |  | **Name & Signature of Project Manager / Host** | | | **Date** |
| **C** | **ENDORSEMENT BY DIVISION WSHO (*Skip this step if there is no WSHO in the division*)** | | | | |
|  | **WSH recommendations:** |  | | |  |
|  | **Reviewed by:** |  | | |  |
|  |  | **Name & Signature of Division WSHO** | | | **Date** |
| **D** | **ENDORSEMENT BY SAFETY & HEALTH DIVISION *(Skip this step if Part C is applicable)*** | | | | |
|  | **WSH recommendations:** |  | | |  |
|  | **Reviewed by:** |  | | |  |
|  |  | **Name & Signature of S&H Rep** | | **Date** | |
| **E** | **ACKNOWLEDGEMENT BY ESTATES (*Skip this step if PM/Host is the BMO)*** | | | | |
|  | **Acknowledge by:** |  | | |  |
|  |  | **Name & Signature of BMO** | | | **Date** |
| **PART II TO BE FILL UP BY CONTRACTOR** | | | | | | | |
| 1. **CONTRACT NO. :** *If any*   **PROJECT TITLE : Hashtag** | | | | | | | |
| 1. **INTRODUCTION**   *Temperature monitoring and control on customer’s cold storage system.* | | | | | | | |
| 1. **LOCATION**   Site plan/ photo/ drawing attached as Appendix A  No site plan/ photo/ drawing attached. | | | | | | | |
| 1. **HIGH IMPACT WORK DECLARATION**   Select the activity which will be involved in the work carried out.   |  |  | | --- | --- | | Working at height of more than 3 metres  **Please specify the height: \_\_\_\_meters**  *Height refers to the working height from the ground to the working platform* | Use of Explosive Powered Tools | | Lifting operations involving the use of cranes | Work process that generate noise/ fume/ vapours | | Hot work | Pressurized testing of pressure vessels | | Confined space entry | Radiography Work | | Erection and dismantling of scaffolds | Painting work | | Excavation or trenching in the ground exceeding 1.5 metres in depth | Dismantling of any pipe and equipment that contains steam or substances that are flammable, toxic or corrosive | | Piling work | Fire impairment works | | Handling of hazardous materials such as toxic, corrosive and flammable substances | Dismantling of asbestos | | Demolition of building structures |  | | | | | | | | |
| 1. **PERSONNEL**  * *Specify the manpower deployed for the work in the table below.* * *Attached the certificates for specialised role. For e.g. Work-at-height supervisor, welder.*  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Name** | **Designation** | **1st and last 4 alpha-numerals of NRIC/FIN/Work Permit (WP) No.**  **(e.g. SXXXX123A)** | **Date of Expiry** | **Serial No. on**  **Work Pass Card or WP** | **Contact Number** | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | | | | | | | | |
| 1. **EQUIPMENT/ MACHINERY**   *List down the main machines and equipment accompanied with the certificate (if applicable) deployed for the work. For e.g. Mobile Elevated Work Platform (MEWP).* | | | | | | | |
| 1. **METHOD STATEMENTS (MS)**   *To attach MS as Appendix B.* | | | | | | | |
| 1. **RISK ASSESSMENT (RA)**   *To attach RA as Appendix C. Ensure the high impact work activity is included in the RA.* | | | | | | | |
| 1. **SAFE WORK PROCEDURE (SWP)**   *To attach SWP as Appendix D.* | | | | | | | |
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