

Contractor Registration Details

Contractor Information

Field	Details
Form#	1
Submitted By	shahadmunazar@gmail.com
Submitted On	01/05/2025, 13:32:43

Company Details

Question	Answer	Attachments
ABN	12345678901	
Company name	SafeBuild Pty Ltd	
Trading name(s)	dssdf	
Company structure	11-50 Employees	
Company representative first name	John	
Company representative last name	Doe	
Your position	Director	
Address	123 Safety Lane	
Street	Safety Lane	
Suburb	Worktown	
State	Victoria	
Post Code		
Phone	+61 400 123 456	
Service to be provided	Electrical Installation	

Insurance

Do you employ people other than independent contractors?	Yes	contractor-registration.pdf, 02/05/2025
Public Liability Insurance Certificate	Yes	434563 (1).pdf, 08/12/2027
Covered Amount (\$)	242424	
Professional Indemnity Insurance	1	

Work Health & Safety

WHS Management System	Yes	contractor_questionnaire.pdf, Invalid Date
Responsible Staff Member	{"name":"Jane Smith","position":"Safety Officer","mobile":"0400123456"}	
Health & Safety Induction	Yes	
Proper Licensing	Yes	
Employee Competency	Yes	
Subcontractor Qualification	Yes	
Subcontractor Insurance	Yes	
Risk Management	Yes	
Emergency Response	Yes	
Incident Notification	Yes	
SWMS / JSAs	Yes	
Onsite Review	Yes	
Monitor Compliance	Yes	
Update Procedures	Yes	
Prosecution History	No	