



Site Attendance Record

Technician Name/s:	SHEWMS no:		Project:	
Company Name:			First Aider:	
VPL Field Manager:	Phone:		STMS:	Phone:
Site Supervisor:	Phone:			
Emergency Evacuation Point:				

ATTENDEES:

I, the undersigned, hereby certify that I have been inducted to this job site by Visionstream, and that I have participated in the identification of hazards associated with working at current location. I agree to implement the control measures identified, including the use of the appropriate PPE as stated in the SHEWMS Document.

[illegible]