**Questionnaire for contractor’s health and safety management**

1. Does your company have an H&S Orientation program (including commitment of Management)?
* Yes
* No

If yes, please provide it.

1. Is your health and safety management system certified to a globally recognized standard (e.g., OHSAS 18001, 45001 or equivalent)
* No, none of our sites are certified to a recognized health and safety management system
* Some sites are certified to a recognized system, and we are in the process of the certifying the others.

Please provide a copy of the certification for these sites.

* Yes, all sites are certified to a recognized Health and Safety Management System.

 If “Yes”, please provide a copy of the certification for all sites.

1. Does your Company record the safety performance for your employees? (Near hits, Accidents, Frequency rate, Severity rate)?
* Yes
* No

Please provide the records for own employees for the 3 previous years and please express your definitions

Year 1: Year 2: Year 3:

1. Does your Company record the safety performance for your contractors? (Near hits, Accidents, Frequency rate, Severity rate)?
* Yes
* No

Please provide the records for your contractors for the 3 previous years and please express your definitions

Year 1: Year 2: Year 3:

1. Does your Company record the fatal accidents for your employees and your contractors?
* Yes
* No

Please provide the records (combined number for own employees and your contractors)

Year 1: Year 2: Year 3:

1. Does your Company have a Personal Protective Equipment Policy?
* Yes
* No

If yes, please provide it

1. Does your Company have defined Safety Responsibilities?
* Yes
* No

\* Question 2 > It is not mandatory to have a certified health and safety management system, but such certification is highly appreciated