

Form 4**Health & Safety Questionnaire to Assess Competency of PSDP.**

Instructions: Cork City Council intends to appoint a competent Project Supervisor Construction Stage (PSDP). Please provide a response to all fields to enable the Council to assess the competence under the Safety, Health & Welfare at Work Act, 2005, Regulations made there under and the Safety, Health & Welfare at Work (Construction) Regulations 2013. Failure to answer all questions in Parts 1 to 11 inclusive, may adversely affect the assessment. Cork City Council reserves the right to seek further information and/or require any person being considered for the role of PSDP or Contractor to attend for interview. Please attach or forward any additional documents, which support the responses you have provided in this questionnaire.

Part 1 – Company Information

☐ Limited Company ☐ Unlimited Company ☐ Sole Trader ☐ Tendering as a Joint Venture

Registered Company Name: _____

Registered Address: _____

Trading Name (if different): _____

Company Registration No: _____ No. of Employees: _____

Describe your company's main areas of work:

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Name of Project: _____

Name of Person completing form: _____

Position: _____ Telephone Number: _____

Email Address: _____

Membership of Professional Bodies: _____

Date Submitted to Cork City Council: _____

Part 2: Compliance with the requirements of the Safety, Health & Welfare at Work Act, 2005.

Identify relevant knowledge of design and construction, particularly in relation to the nature of the project:

What is your experience of preparing a Safety & Health Plan:

What is your experience of co-ordinating the health & safety activities of different designers and acting as a liaison between the design function and the construction work on site ?

What is your experience in preparing a Safety File:

Will you have sufficient resources assigned to this project ? Outline:

Part 3 Compliance with the Safety, Health & Welfare at Work (Construction) Regulations 2006 & 2013:

Evidence of a functioning safety management system:

- Is there an up to date Safety Statement. Please provide details on the date of last review and how you bring the document to the attention of employees:

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- Are individuals identified with responsibility for health and safety for each project?

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- Do you have an accredited Safety Management System?

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Please provide details on notifiable accidents and dangerous occurrences over the last 5 years.

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Please provide details on any Notices issued by the H.S.A. in the previous 5 years.

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Please describe how you intend to take account of the General Principles of Prevention during the various stages of design and preparation of the project:

Please describe how you intend to take account of “Particular Risks” as per those identified in Schedule 1 of the Construction Regulations 2013.

Please describe how you intend to arrange for co-operation between designers on the same project, including permanent and temporary works designers:

How will you ensure co-ordination of their activities in relation to the design of the project with a view to protecting the safety, health and welfare of persons involved in construction work:

Where relevant, how will you coordinate the activities of various designers such as Permanent Works Designers, Specialist Designers and Temporary Works Designers:

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Part 4 Qualifications & Previous Health & Safety Experience

Detail Health & Safety Qualifications & relevant experience of key personnel, who will be assigned to this project. Please supplement with CV's.

Name	Qualifications /CPD	Summary of Experience

Name	Qualifications /CPD	Summary of Experience

Name	Qualifications /CPD	Summary of Experience

Name	Qualifications /CPD	Summary of Experience

Please provide details of projects where you have undertaken the role of PSDP

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Part 5 Any Further Information:

Please provide any further information which would assist Cork City Council to assess your competence to be appointed as PSDP:

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Part 6 Insurance:

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| Do you have current Public Liability Insurance? | ☐ | ☐ |
| Do you have current Employers Liability Insurance? | ☐ | ☐ |
| Do you have Contractors All Risk Insurance | ☐ | ☐ |
| Have Consultants providing professional advice & services have Professional Indemnity Insurance? | ☐ | ☐ |

Part 7 Attachments to Forward to Cork City Council:

1. Safety Statement, signed & dated.
2. Sample Specific Health & Safety Plan.
3. CV for intended Safety Advisor.
4. CV's for Designer/s.
5. Training Records.
6. Copy of Certified Safety Management System
7. Insurances.

Part 8 To be completed by Cork City Council only.

Having considered this Health and Safety Competence Assessment, in line with the requirement of the Safety, Health and Welfare at Work (Construction) Regulations 2013, I confirm that I am satisfied that the following named company;

is competent to carry out the duties of Project Supervisor Design Process in respect of the named project;

Details of Health & Safety Competence Assessor:

Print Name: _____ **Date:** _____

Signature: _____