

Sub-Contractor Questionnaire

Name and Address	
Nature of Business	
Number of Employees	
Contact Number	
E-mail address	

1.	Have you got a Health and Safety Policy. If 'Yes' please provide a current copy	Yes / No			
2.	State how many of the following you have reported under RIDDOR in the last 3 years				
		Year 1	Year 2	Year 3	Year to Date
	Specified Injuries				
	Over 7 Day Injuries				
	Dangerous Occurrences				
	Reportable Diseases				
3.	Have you been served with any improvement notices in the last 3 years. If 'Yes' please provide details on a separate sheet	Yes / No			
4.	Have you been prosecuted for a Health & Safety offence in the last 3 years. If 'Yes' please provide details on a separate sheet	Yes / No			
5.	Are you a member of or accredited by a trade organisation? If 'Yes' please provide details and copies of the certificates.	Yes / No			
6.	Please provide a copy of your current risk assessment and method statement documents				
7.	Please provide copies of the insurance certificates/schedules of brokers letters for:- <ul style="list-style-type: none"> • Public Liability • Product Liability (where appropriate) • Employers Liability (where appropriate) • Professional Indemnity (where appropriate) 				
8.	Please describe your onsite arrangements for monitoring your staff to ensure the task is completed to the specification.				
9.	Do you issue your staff with appropriate Personal Protective Equipment. If 'Yes' please confirm equipment supplied:-	Yes / No			

Name: _____

Position _____

Signature: _____

Date _____



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