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| **Contractor Induction Questionnaire** | | | |
| **NAME:** | |  | |
| **DATE:** | |  | |
| **PHONE NUMBER:** | |  | |
| **COMPANY:** | |  | |
| **YOUR POSITION:** | |  | |
|  | | | |
| **Damar Office Use Only – Induction Facilitator/Trainer to complete.** | | | |
| **🗌 Contractor number assigned # \_\_\_\_\_\_\_\_\_** | | | **🗌 Input into Database (Vault)** |
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| **Completed By:** |  | | **Date:** |

**On completion of the Health and Safety Induction, Contractors are required to complete the below questionnaire to demonstrate, that they have understood the contents of the Health and Safety Induction. All answers must be 100% correct for this induction to be achieved and before a Contractor may be admitted onto site.**

Answer the following questions relating to health and safety on site.

1. Damar is obliged to ensure all people entering site are informed of the hazards they may encounter under what three pieces of legislation?

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1. What must you do if you need to bring your vehicle on site?
   1. Follow your site contact’s instructions on the procedure for admittance
   2. Proceed through the security gates at 5km per hour
   3. Ensure your headlights are on
   4. All of the above
2. Should you sign out if you are going off site for a short period of time?
   1. Yes
   2. No
   3. No – as long as I advise my site contact that I’m coming back.
3. What do you do when the emergency siren sounds?
   1. Exit into the locker rooms, grab your gear and await further instructions
   2. Leave by the nearest exit and gather at the Emerency Assembly Area
   3. Grab the nearest extinguisher and get ready to fight the fire
   4. Get back into your vehicle and drive away
4. What PPE is compulsory in production areas?
   1. Full Hazmat suit and breathing apparatus
   2. Safety glasses, cotton high visibility vest/overalls and safety footwear
   3. Overalls, safety boots and hearing protection
   4. Safety glasses, hearing protection and overalls
5. What additional PPE is compulsory in the Aerosol Hall?
   1. Hard hat
   2. Safety glasses
   3. Safety footwear
   4. Hearing protection
6. Circle **any** of the following that are restricted in production areas?

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| --- | --- | --- | --- | --- | --- |
| prohibition_no_mobiles | prohibition_no_pedestrians | prohibition_no_fire | prohibition_no_ground_conveyor | prohibition_no_smoking | prohibition_no_eatingdrinkingprohibition_no_eatingdrinking |

1. What is the most likely cause of a fire on site?
   1. Smoking in the designated area
   2. Static electricity
   3. Lightning strike
   4. All of the above
2. What two Chemical Classes are not held on site?

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1. Where can you get further information on Chemicals?
   1. Label
   2. Safety Data Sheet (SDS)
   3. Technical Staff
   4. All of the above
2. Pedestrians must give way to forklifts and reach trucks on site.
3. True
4. Flase
5. Pedestrians must remain at least how many metres away from an exclusion zone when in place?
6. 1m
7. 2m
8. 3m
9. 5m
10. Fire, chemicals and forklifts are the three major hazards on site. List **4 more** hazards you may encounter on site.

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1. Where can you find a copy of Damar’s Permit to Work Procedures Manual?
2. At reception
3. In all production areas
4. At the Permit to Work Station in the GMH
5. On the internet
6. Does Damar permit the use of yellow ‘Warning’, ‘Caution’ or other tags on site?
7. Yes
8. No
9. Contractors are subject to post accident/incident drug and alcohol testing.
10. True
11. False
12. Do all events (hazards, incidents, injuries and near misses) need to be documented and reported to your site contact?
    1. Yes
    2. No
    3. Only if they saw it
    4. Only if I caused it

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| **Contractor Induction Sign Off** |

I hereby acknowledge that I fully understand and/or have been made aware of, and have also personally completed the aforementioned Health and Safety Induction Training.

I agree to abide by all Damar site safety rules and follow policies, practices and procedures established to maintain health and safety.

I agree to conform to al lrequirements under the Health and Safety at Work Act 2015, legislation, regulations, standards and Worksafe NZ.

I understand that I am required to report all hazards, accidents, incidents and near misses to my site contact.

I agree to abide by the site’s Drug and Alcohol Policy and give my consent for any testing that I may be selected for.

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| **CONTRACTOR’S NAME** |  |
| **SIGNATURE** |  |
| **DATE** |  |

|  |  |
| --- | --- |
| **INDUCTOR’S NAME** |  |
| **SIGNATURE** |  |
| **DATE** |  |