



**Thomas Armstrong (Holdings) Group of Companies  
Thomas Armstrong (Construction) Ltd  
Health & Safety Questionnaire for Subcontractors**

**Form F55  
Issue 7 09/15  
Single A4**

In order to fulfill our obligations under the Construction (Design & Management) Regulations (CDM), we must ensure that subcontractors engaged to carry out work on our construction sites are competent with regard to health and safety.

Please therefore complete this questionnaire, and return it with supporting documentation, for review by our Safety Department

	Details attached
<b>If you have ISO 18001/CHAS or other SSIP Certification please send us a copy of the certificate. (You do not need to complete the remaining questions)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a written Health & Safety Policy that includes responsibilities and arrangements, which is signed by a senior officer of your Company? If yes, please provide a copy.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you understand your duties as a Contractor under CDM?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give details of your source of competent advice on health & safety, and provide details of their training/CV	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name <span style="float: right;">Position</span>	
Please provide details of health & safety training provided to your staff and site operatives	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do your site operatives hold CSCS and/or CPCS cards?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please describe your arrangements for monitoring and reviewing health & safety matters	Yes <input type="checkbox"/> No <input type="checkbox"/>
What are your arrangements for consultation with employees on health & safety?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details of your accident reporting and investigation procedures.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details of any the number of accidents reported to the HSE under RIDDOR in the past five years (if none, please state here)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details of any HSE Prosecutions, Prohibition Notices, or Improvement Notices issued to your Company in the last five years (If none, state here). If there has been an enforcement action, please describe the measures taken as a result.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you subcontract any of your site operations? If "yes" please describe how you assess the competence of subcontractors engaged.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide examples of risk assessments produced (including specific assessments required by Regulations, e.g. COSHH, Noise)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide references for your company from Clients/Contractors you have carried out work for.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Should Thomas Armstrong (Construction) Ltd place a subcontract order with your Company, please note that **site specific risk assessments (and method statements, if applicable) will be required prior to commencement on site**

Questionnaire completed by:

Position:

Company:

Date: