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| **At completion of the work scope or project, Category 1 Contractors are to complete this form.** |
| **Contractor Organisation Name:** |  |
| **Contractor Representative Name:** |  |
| **Representative Position Title:** |  |
| **Phone:** |  |
| **Email:** |  |
| **PON Representative Name:** |  |
| **Work Site:** |  |
| **PON Work Order Number:** |  |
| **Work Description:** |  |
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| **Required Information** | **Yes** | **No** | **N/A** |
| All work has been completed using original equipment manufacturer parts or approved parts and processes. |[ ] [ ] [ ]
| Has all work equipment, tools, signage and rubbish been removed from the work area? |[ ] [ ] [ ]
| Have any isolated electrical, water or fire safety systems been restored? |[ ] [ ] [ ]
| If equipment or plant is unable to be returned to service, has an “Out of Service Tag” been placed? |[ ] [ ] [ ]
| Were there any incidents, near misses, injuries, or illnesses during this work? If yes, *attach a copy of your incident report.* |[ ] [ ]   |
| Were there any environmental events during this work?*For example: spills to land or water of any size, dust events, noise complaints, heritage items located, interaction with unknown contaminated materials etc*. |[ ] [ ]   |
| Was there any damage to PON infrastructure?If yes, *attach a copy of your incident report.* |[ ] [ ]   |
| Were there any general learnings that should be communicated? If yes, please detail below:  |[ ] [ ]   |
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| **Contractor Declaration:** |
| By completing this form, I hereby declare that I have read, understand and certify that the above statements are true and correct to the best of my knowledge. |
| **Signed:** |  | **Date:** |  |
| **PON Review** |
| **PON Representative Name:** |  |
| **PON Representative Title:** |  |
| **Date:** |  |
| **Note any follow up actions:** |  |
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