

CONTRACTOR ESH QUALIFICATION QUESTIONNAIRE
ESH (Environmental, Safety, and Health)

1) Contractors Name: _____

Name, Title, and contact information of company representative completing form:

Name	
Title	
Phone	

2) OSHA Total Recordable Injury Rates (TRC) and Days Away, Restricted, or Transferred Rates (DART) for the current and past three years. Please report the rate, not the number of cases.

<i>Year</i>	<i>TRC rate</i>	<i>DART rate</i>

3) OSHA 300A Logs:
Please attach your latest updated OSHA 300A Log, and those for the past three years.

4) Experience Modification Rate (EMR/MOD):
List your current EMR and those for the last 3 years; attach documentation from your Insurance Carrier on their letterhead with their representative's signature and title.

Year	EMR

5) Citations
Has your company received any citations in the past (3) years from any government agency?
(This includes ANY citations related to Environmental, Safety, and Health).

☐ YES ☐ NO

If yes, include a copy of citation(s) and abatement actions.

6) ESH Program

Does your company have a written "ESH Program", including a mission statement, policies and procedures?

☐ YES ☐ NO

If available, please provide a copy of your ESH manual and policies.

If yes, does the program address Environmental Safety and Health concerns?

☐ YES ☐ NO

If yes, what of the following elements does your program include?

- ☐ Accident Reduction Program or AWAIR
- ☐ Safety Committee
- ☐ Safety Inspection Program
- ☐ Environmental Requirements (SPCC, storm water control, waste management, etc)
- ☐ ESH manual
- ☐ Crisis Management Program
- ☐ Substance-free Policy
- ☐ Work Planning and Control
- ☐ Emergency Response
- ☐ Substance-free Policy
- ☐ Fall Protection Program
- ☐ Hot Work Program
- ☐ LOTO Program
- ☐ Electrical Safety Program
- ☐ Respiratory Protection Program
- ☐ Hearing Conservation Program
- ☐ Incident Investigation, Reporting, and Lessons Learned Program

Does your ESH program include a Training Program?

☐ YES ☐ NO

If yes, what of the following elements are addressed in the training program?

- | | |
|---|--|
| ☐ Company Safety Policy | ☐ Company Safety Rules |
| ☐ Fall Protection | ☐ Emergency Action Plan |
| ☐ Fire Prevention | ☐ PPE |
| ☐ Respiratory Protection | ☐ New Hire Orientation Program |
| ☐ Asbestos Training | ☐ Confined Space |
| ☐ LOTO | ☐ Hot Work |
| ☐ Electrical Safety | ☐ Blood borne Pathogens |
| ☐ Hazard Communications | ☐ Injury/Illness Record keeping |
| ☐ Hearing Conservation | ☐ CPR/First Aid Training |
| ☐ Lead Abatement | ☐ OSHA 10 Hour certification |
| ☐ OSHA 30 Hour certification | ☐ Fire extinguisher |
| ☐ Defensive Driving Course | ☐ Scaffold Training |
| ☐ Powered Industrial Truck cert. | ☐ Pre job safety inspection |
| ☐ Asbestos Awareness | ☐ Asbestos Abatement |
| ☐ Fire Detection/Impairment | ☐ Environmental |

7) ESH Professionals

Does your firm employ a Corporate ESH Director/Manager? If yes, please check.

☐ YES ☐ NO

If yes, please provide the name, phone number and their qualifications

Is there one person responsible for managing the ESH aspects on a daily basis on your job sites?

☐ YES ☐ NO

If yes, what are your company's requirements with respect to qualifications for this person?

8) Does your company proactively screen sub-contractors safety performance?

☐ YES ☐ NO

If yes, what are the indicators used to evaluate ESH performance?