



KZN Department of Public Works

WIMS WG24PU-01

O.H.S.E.

2006/10/09

(Occupational, Health, Safety & Environment Questionnaire)

Key Information

Controlling Office	<input type="text"/>	File No	<input type="text"/>
Client Department	<input type="text"/>		
WIMS Number	<input type="text"/>		
Contract Number	<input type="text"/>		
Service Description	<input type="text"/>		
Contractor Firm's Code	<input type="text"/>		
Contractor Firm's Name	<input type="text"/>		
Project Manager's Name	<input type="text"/>		
Tender Number	<input type="text"/>		
Tender Award Date	<input type="text"/> - <input type="text"/> - <input type="text"/>		
Financial Year	<input type="text"/> / <input type="text"/>		

An indicator "Y" (Yes) or "N" (No) must be entered next to each of the following Item fields

Item	Description	Indicator
1	Contract awarded	<input type="text" value="Y"/>
2	Contractor - O.H.S.E. plans received	<input type="text"/>
3	Contractor - O.H.S.E. plans approved	<input type="text"/>
4	Project audited	<input type="text"/>
5	Project stopped due to non-compliance	<input type="text"/>
6	Site O.H.S.E. meeting/s conducted	<input type="text"/>

COMMENT/S :

<input type="text"/>
<input type="text"/>

Principal Consultant Firm	<input type="text"/>		
Consultant's Initials and Surname	<input type="text"/>		
Consultant's Signature	<input type="text"/>	Date	<input type="text"/>
Project Manager's Signature	<input type="text"/>	Date	<input type="text"/>
Data entered on WIMS by	<input type="text"/>	Date	<input type="text"/>
