



APPLICATION FOR
THAMES-COROMANDEL DISTRICT COUNCIL
APPROVED CONTRACTOR

Date:
Applicant's Name:
Company Name:
Company Address:
Telephone:
Fax:
Email:

Please tick applicable trade you are applying for.

Table with 3 columns: Code, Description, Tick. Rows include Maintenance Tradesman, Roading, Construction/Earthworks, Landscaping Soft, Landscaping Hard, and Other /Specialist Services.

Horizontal lines for describing specialist services.



## APPLICATION FOR THAMES-COROMANDEL DISTRICT COUNCIL APPROVED CONTRACTOR

Please supply the following relevant information with your application

**Check List**  
✓

**1. QUALIFICATIONS AND/OR EXPERIENCE**

- Number of years experience
- References to relevant experience
- Copies of appropriate certificates for licenses held by all staff
- Examples of work successfully undertaken
- Photos of your latest project undertaken
- References from previous projects undertaken

**2. YOUR HEALTH AND SAFETY POLICY DOCUMENTATION**

- Evidence that Health and Safety responsibilities are addressed.
- Evidence of Accident/Incident recording (i.e. A copy of your accident register or form)
- Training records that verify appropriate training has been undertaken and completed.

**3. INSURANCES**

- A copy of your current public liability insurance
- A copy of your current vehicle insurance

### HEALTH AND SAFETY HISTORY QUESTIONNAIRE

<b>Please tick the correct answer to the following questions relating to your company's Health and Safety history:</b>		
<b>If the answer to any of the questions asked below is 'YES', please supply further information.</b>	<b>Tick</b>	
	<b>Yes</b>	<b>No</b>
Have you been prosecuted in the last five years, or do you have any prosecutions pending, for any offence under the Health and Safety in Employment Act 1992 or any associated regulations?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been issued with any prohibition or improvement notices by the Occupational Safety and Health Service of the Department of Labour during the last five years?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had any serious harm accidents in the last five years?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been refused workplace insurance cover as a result of a serious harm accident?	<input type="checkbox"/>	<input type="checkbox"/>

**Please complete this application form and return along with your Health and Safety Policy to:**

*Wendy Johnson  
Thames-Coromandel District Council, Private Bag, Thames 3500*