

PRIME CONTRACTOR ASSIGNMENT AGREEMENT

Contract #: _____ Date: _____
 Forsite Employee Completing the Review: _____
 Contractor: _____
 Address: _____
 Phone: _____ Fax: _____ Email: _____
 Contact Person: _____

The goal of the Prime Contractor assignment is to ensure the health and safety of workers at the multiple employer worksite is coordinated. Forsite assigns Prime Contractor responsibilities in situations where it is impractical for them to fulfill the role of Prime Contractor as they may not be at the worksite on a regular basis and the contractor is more effective at managing the health and safety due to capability and logistics. The intent of the checklist is to clearly identify the roles and responsibilities for the Prime Contractor assignment.

Forsite retains the responsibility to monitor the prime contractor and ensure responsibilities are being completed and to issue corrective actions where they are not.

Prime Contractor Responsibilities

- Complete a pre-work hazard assessment meeting and Communicate known workplace hazards to all workers/contractors Yes No
- Maintain control of the worksite /post a sign indicating the prime contractor Yes No
- complete a first aid assessment for the worksite Yes No
- Maintain an emergency response plan for the worksite Yes No
- Maintain the required level and number of first aid attendants at the worksite Yes No
- maintain the required first aid resources at the worksite (ETV/Kits/Etc) Yes No
- Ensure a representative from each contractor at the worksite is named Yes No
- Ensure each contractor’s contact is communicating to their workers Yes No
- Ensure an effective means of communication is available at the worksite Yes No
- Report all close calls/incidents to Forsite within 24 hours of occurrence Yes No
- Complete an incident investigation following a close call/Incident Yes No
- Complete at minimum, monthly safety meetings with all workers/contractors Yes No
- Complete tailgate safety meetings following hazard ID, close calls, incidents Yes No
- Ensure all workers/contractors have the required training/certifications Yes No
- Provide records to substantiate responsibilities are being fulfilled on request Yes No

Other: _____
 Other: _____
 Other: _____
 Other: _____
 Other: _____
 Other: _____

Contractor Signature: _____ **Date:** _____

Forsite Signature: _____ **Date:** _____