McLAREN

Project Name: W03

Contract No: WP-0135

SUB-CONTRACTORS SAFETY PACK COVER SHEET FOR: RAPHAEL CONTRACTING LIMITED
WEEK ENDING: 14/04/19

ITEM INSPECTION REQUIREMENT	ATTACHED			CONTRACTOR REQUIREMENTS	SAF Ref	COMMENT	DATE
	YES	NO	N/A				
Tool Box Talks	☒	☐	☐	At least one TBT per week must be carried out to all contractor operatives various subjects as detailed by MCL. Copies of the TBT attendance register accompanied with the document material used to deliver the TBT must be submitted to MCL.	SAF020	Attached	☐
HAVS Register	☐	☒	☐	Copies of the HAVS Register alongside with the relevant tool data sheet must be submitted to MCL		HAVS Regirter issued to MCL 27/07/18	☐
PAT Test Register	☒	☐	☐	Regular certification updates required for all new portable electric tools	SAF042 Section I	Attached	☐
PUWER, Plant & Machinery Inspection	☐	☐	☒	Records of daily inspections must be submitted to MCL for all plant, machinery and equipment owned by the relevant contractor	SAF042 Section D		☐
Plant & Machinery Thorough Examination Certificates	☐	☐	☒	To be submitted for all new plant and equipment requiring a thorough examination certificate with a copy being issued to MCL site	SAF052		☐
L.O.L.E.R Weekly Inspection Record	☐	☐	☒	Inspection records for any lifting equipment & accessories	SAF042 Section C		☐
COSHH	☐	☒	☐	Register & COSHH data sheets required for all hazardous materials arriving on site		COSHH sheets issued to MCL 10/09/18	☐
Site Managers Safety Audits / Reports	☐	☒	☐	Copies of weekly inspection reports must be issued to MCL		Report issued to MCL 18/03/19	☐
Independent Safety Audits / Reports	☐	☒	☐	Copies of all Independent Safety inspection		Report issued to MCL 22/03/19	☐
Scaffold / Edge Protection	☐	☐	☒	Copies of weekly inspection reports carried out by competent person / contractor	SAF042 Section A		☐

Training Certificates	☐	☒	☐	Copies of all training certificates must be provided at Site Induction supervisor to confirm all competency cards (CSCS / CPCS) remain in date for all operatives		Issued to MCL 19/07/18	☐
Plant Operators Authorisation Record	☐	☐	☒	Update to new Plant Operators recently arriving on site Use of McLaren Form (SAF023) must be used	SAF023		☐
Harness Inspection Record	☐	☐	☒	Copies of weekly inspections of all harnesses carried out by a competent person	SAF042 Section G		☐
Waste Record Sheets	☐	☒	☐	Copies of waste transfer notes, carrier / disposal licences & monthly waste summary report	SAF051	No waste transfers this week	☐
Accident / Incident and Near Miss Reports	☐	☒	☐	Copies of reports of any accidents and near misses	SAF30	No accidents no near misses this week	☐
RAMS Updates / Briefings	☐	☒	☐	Any amendments to current RAMS to be completed and evidence provided including briefing sheets		Last Update 16/10/18	☐

This document must be submitted to the McLaren Project Team weekly. The information provided above must be correct and reflect the current activities, plant, equipment and operatives (CSCS/CPCS) on site.

Contractors Representative (Manager) Name: A. Kulsinskas

Signature:

Date: 12/04/19

RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Green Purchasing	**Date: 09.04.19**
Location: Wembley W03	**Start Time: 16:30**
Duration (Minutes) 30min	**End Time: 17:00**
Presenters name: A. Kulsinskas	**Presenters Signature**

	Candidate's Name	Name of Employer	Candidate's Signature
1	M. Kowalski.	RCL	I confirm that I have understood the Tool Box Talk
2	K. Kowalski.	RCL	I confirm that I have understood the Tool Box Talk
3	Joseph Smith	RCL	I confirm that I have understood the Tool Box Talk
4	D. RASCIUCI	R.C.L	I confirm that I have understood the Tool Box Talk
5	H. GORASIA	R.C.L	I confirm that I have understood the Tool Box Talk
6	BERNARDO B R.	RCL	I confirm that I have understood the Tool Box Talk
7	I. Kayoushyx	RCL	I confirm that I have understood the Tool Box Talk
8	R. RAMA.	RCL	I confirm that I have understood the Tool Box Talk
9	J. MUSHICCNE	RCL	I confirm that I have understood the Tool Box Talk
10			I confirm that I have understood the Tool Box Talk
11			I confirm that I have understood the Tool Box Talk
12			I confirm that I have understood the Tool Box Talk
13			I confirm that I have understood the Tool Box Talk
14			I confirm that I have understood the Tool Box Talk
15			I confirm that I have understood the Tool Box Talk

Grant Claim information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
9	30min	4.5 hours	2453745

RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

No: 35 Title: PORTABLE ELECTRICAL TOOLS	Date: 09/04/19
Location: WELLINGTON HOUSE	Start Time: 7:30
Duration (Minutes) 30 min	End Time: 8:00
Presenters name: S. GILLONOVIC	Presenters Signature:

	Candidate's Name	Name of Employer	Candidate's Signature
1	E. STOYANOV	RCL	I confirm that I have understood the Tool Box Talk
2	A. ZAGERAS	RCL	I confirm that I have understood the Tool Box Talk
3	DL. SUDRA	RCL	I confirm that I have understood the Tool Box Talk
4	N. HALBHANA	RCL	I confirm that I have understood the Tool Box Talk
5			I confirm that I have understood the Tool Box Talk
6			I confirm that I have understood the Tool Box Talk
7			I confirm that I have understood the Tool Box Talk
8			I confirm that I have understood the Tool Box Talk
9			I confirm that I have understood the Tool Box Talk
10			I confirm that I have understood the Tool Box Talk
11			I confirm that I have understood the Tool Box Talk
12			I confirm that I have understood the Tool Box Talk
13			I confirm that I have understood the Tool Box Talk
14			I confirm that I have understood the Tool Box Talk
15			I confirm that I have understood the Tool Box Talk

Grant Claim information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
4	30 min	2 h.	2453745

[redacted] I CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

Title: No: 49 SLIPS, TRIPS AND FALLS (TRAILING CABLES) ISG REQUEST	Date: 10/04/19
Location: WELLINGTON HOUSE	Start Time: 9:00
Duration (Minutes) 30min	End Time: 9:30
Presenters name: S. SIMONOVIC	Presenters Signature:

	Candidate's Name	Name of Employer	Candidate's Signature
1	R. STOYANOV	RCL	I confirm that I have understood the Tool Box Talk
2	A. ZAGERAS	RCL	I confirm that I have understood the Tool Box Talk
3	D.L. SUDRA	RCL	I confirm that I have understood the Tool Box Talk
4	N. ALIBASANA	RCL	I confirm that I have understood the Tool Box Talk
5			I confirm that I have understood the Tool Box Talk
6			I confirm that I have understood the Tool Box Talk
7			I confirm that I have understood the Tool Box Talk
8			I confirm that I have understood the Tool Box Talk
9			I confirm that I have understood the Tool Box Talk
10			I confirm that I have understood the Tool Box Talk
11			I confirm that I have understood the Tool Box Talk
12			I confirm that I have understood the Tool Box Talk
13			I confirm that I have understood the Tool Box Talk
14			I confirm that I have understood the Tool Box Talk
15			I confirm that I have understood the Tool Box Talk

Grant Claim information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
4	30min	2h.	2453745

RAPHAEL CONTRACTING LTD

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: WELLINGTON HOUSE

OPERATIVE NAME	HARD HAT	SAFETY GLASSES	HI-VIZ VEST	GLOVES	EAR DEFENDERS/ PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
S. SIMONOVIC						✓				✓		18/03/19
B. SINGH						✓				✓		18/03/19
D. CONYERS						✓				✓		20/05/19
B. SINGH						✓				✓		21/03/19
B. SINGH						✓				✓		26/03/19
J. SMITH				✓			✓					28/03/19
R. STOYANOV	✓	✓				✓	✓					01/04/19
A. ZAGERAS	✓		✓			✓	✓					01/04/19
N. AUBASANA			✓	✓		✓	✓					01/04/19
D.L. SUDRA	✓	✓	✓	✓		✓	✓					01/04/19
R. STOYANOV						✓				✓		08/04/19
D.L SUDRA				✓						✓		12/04/19
N. AUBASANA				✓						✓		12/04/19

RAPHAEL CONTRACTING LTD

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: WELLINGTON HOUSE

OPERATIVE NAME	HARD HAT	SAFETY GLASSES	HI-VIZ VEST	GLOVES	EAR DEFENDERS/ PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
R. STOYANOV				✓		✓				✓		12/04/19
A. ZAGERAS						✓				✓		12/04/19

Page - 3