

Parkland Pipeline Contractors Ltd. is committed to maintaining a safe and healthy work environment through the active participation and support of Parkland's Loss Management Program. As part of our commitment to this program, we must pre-approve those who may be providing us with sub-contract work.

As part of the pre-qualification process, we require you to provide us with a copy of the general documentation noted below and a complete copy of the attached questionnaire.

1. Documentation Request

- a. A copy of your current Safety Program Manual (or a copy of its table of contents and your company's Safety Policy).
- b. A Current Clearance Letter from the Worker's Compensation Board.
- c. WCB Employer Premium Rate Statements for the two most recent years along with the corresponding industry rate.
- d. A Certification of Liability Insurance (reflecting compliance with no less than \$2,000,000.00 comprehensive general liability and \$2,000,000.00 automobile liability insurance for each occurrence).
- e. Should you have a "Certificate or Recognition: signifying an audited & approved Safety Program, a copy is requested.
- f. A copy of your company's safety statistics (ie: man-hours worked, fatalities, lost time injuries & medical aid injuries) for the last 3 years.

2. Sub-Contractor Health, Safety & Environmental Questionnaire

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| a. Does your company have a written safety program?
If so, please ensure a copy is provided (at minimum a copy of the table of contents and your company's Safety Policy). | Yes | No |
| b. Do you have a recognized safety program that has received a Certificate of Recognition? If so, please provide a copy. | Yes | No |
| c. Are your senior management, supervisory staff and employees aware of the contents of the company's safety program? | Yes | No |
| d. Does your company develop safe work procedures, standards practices for the work being performed? | Yes | No |
| e. Provide supporting processes for ensuring necessary employee competencies. | Yes | No |
| f. Does your managerial, operations staff, supervisory staff, and employees comply with the provincial OH&S and WCB regulations applicable to your company's work activities? | Yes | No |
| g. Does your company ensure that management, supervisors and Employees understand their specific responsibilities for safety? | Yes | No |
| h. Does your management personnel conduct routine site inspections? | Yes | No |
| i. Does your company have a policy outlining the responsibilities and frequency for conducting regular inspections of equipment, work sites and employee action? | Yes | No |
| j. Has a preventative maintenance program been developed and implemented for all your equipment? | Yes | No |
| k. Does your company have standards for purchasing material & renting equipment, and follow appropriate engineering standards? (ie: CSA, ASME)? | Yes | No |
| l. Does your safety program identify work hazards for your Company's work activities and are procedures to control those hazards developed? (ie: risk/hazard assessments). | Yes | No |
| m. Does your company have a process in place that allows employees to promptly submit reports of hazards, incidents, and near-misses at the worksite? (Note: Incidents include: injuries, equipment/property damage, spills, fire, security and near-misses). | Yes | No |

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| n. Is a review and follow-up on all incidents conducted? | Yes | No |
| o. Does your company have an effective incident reporting structure in place that ensures hazards are identified and either controlled or eliminated. | Yes | No |
| p. Does your company conduct periodic audits to ensure the effectiveness of its safety program? | Yes | No |
| q. Does your company conduct routine safety meetings? | Yes | No |
| r. Are minutes from these meetings kept on file and circulated to all employees? And, are follow-up items addressed and captured at the next meeting? | Yes | No |
| s. Are all workers involved in pre-job safety meetings and are the meeting topics & attendance documented? | Yes | No |
| t. Does your company use appropriate communication methods (ie: posters, bulletins, & bulletin boards) to stress the importance of good health and safety practices? | Yes | No |
| u. Does your company develop and use safety statistics as a measuring tool to control losses? Please provide a copy of your safety statistics (ie: Man-hours worked, modified work, and lost time injuries for the last 3 years). | Yes | No |
| v. Does your company have an effective modified work program in place for injured workers? | Yes | No |

3. Sub-Contract Company Acknowledgement

The preceding information is correct and accurate to the best of my knowledge. As an authorized representative of my company, I acknowledge that my company and representatives within will comply with all policies, rules, and regulations applicable to our operation.

Sub-Contract Company Name: _____

Sub-Contract Representative Name: _____

Sub-Contractor Representative's Signature: _____

Date of Acknowledgement: _____