

Company:

Auditor:

Contact

| | | | |
|-----|--|--|--|
| PRE | | | |
|-----|--|--|--|

Pre Audit Date:

| | | | |
|--------|--|--|--|
| office | | | |
|--------|--|--|--|

Office audit date

Site audit date

| | | | |
|------|--|--|--|
| site | | | |
|------|--|--|--|

A. Pre Audit Requirement AUTOMATIC NON-COMPLIANCE

| FACTOR | Score |
|---|----------|
| | yes / no |
| copy company letter head showing full details | |
| Does company have Employer's Liability Insurance | |
| Does company have Public Liability Insurance | |
| Does company have an Environmental Policy/statement | |
| copy of meathod statements | |
| copy of H&S risk assessments | |
| cosh assesments | |
| copy of site recording logs/journals | |
| List of Technicians (including cswip levels) | |
| List of Sites Worked on in Past 12 months | |
| List of technicians past 12 mounths(hired in / subcontractors) | |
| Management system for above if applicable | |
| List of technition deployment to Sites Past 12 months | |
| Does company have a Health and Safety Policy /statement | |

If any scores are "No" then this is an automatic Non-Compliance

B.Pre Audit , AUDIT ASSESSMENT - Company Information

| | FACTOR | | | Score |
|--------------------------------------|--------|----|----------------|-------|
| | yes | no | not applicable | |
| | 0 | 20 | 0 | |
| Company registration (if applicable) | | | | |
| VAT Registration number | | | | |
| Company address | | | | |
| Approved Supplier List | | | | |

total

