

HSEQ DETAILS
(To be filled by Manufacturer)

1-	Do you have a formal written Safety Policy?	YES	NO
	If yes, please attach a copy(s)		
	Is safety policy distributed to all employees and posted at the offices?	YES	NO
2-	Do you have a safety program manual?	YES	NO
	If yes, please state scope		
	<hr/>		
	<hr/>		
3-	Do documented procedures exist to support the safety manual?	YES	NO
	If no, how is your safety program implemented?		
	<hr/>		
	<hr/>		
4-	Do you operate a formal review/audit of the safety program?	YES	NO
	How are review/audit results identified, documented and implemented?		
	<hr/>		
	<hr/>		
5-	Do you hold regular safety meetings for all employees	YES	NO
	If yes, how frequently do you hold these meetings?		
	Weekly	<hr/>	
	Fortnightly	<hr/>	
	Monthly	<hr/>	
	Others	<hr/>	When? <hr/>
		<hr/>	
6-	Do you hold regular safety inspection ?	YES	NO
	If yes, please provide details.		
	<hr/>		
	<hr/>		
	<hr/>		
7-	What Type of employee training programs is in place?		
	<hr/>		
	<hr/>		

Is training delivered to subcontractors / vendors?	YES	NO
Is training delivered to clients?	YES	NO

8- How are accidents investigated and reports circulated to management? Give a copy of any report if available.
