



HSE QUESTIONNAIRE AND DECLARATION FOR CONTRACTORS PERFORMING HIGH-RISK WORK

- WE DRAW SPECIAL ATTENTION TO CAREFULLY READING ATTACHMENT Z01 TO BHP/07/P - HSE REQUIREMENTS FOR CONTRACTORS.
- PLEASE COMPLETE ALL DATA WITH UTMOST CARE. THE COMPLETED QUESTIONNAIRE AND SIGNED DECLARATION MUST BE SENT BACK TO AIR LIQUIDE.
- **NOTE: THE DECLARATION ALSO APPLIES TO ANY SUB-CONTRACTORS YOU ENGAGE TO PERFORM WORK FOR AIR LIQUIDE.**

Contractor Details	
Company Name	
Tax Identification Number	
Full name of the person completing the questionnaire	
Position/Title of the person completing the questionnaire	
Contact person	
Phone number	
E-mail address	

1. HSE Management System in the Company				
	Question	Answer		Comment AL or Contractor
		Yes	No	
1.1	Does the organization have an Occupational Health and Safety Management System implemented in accordance with the PN-ISO 45001 standard? If yes, proceed to Section 2.	<input type="checkbox"/>	<input type="checkbox"/>	Please attach a scan of the certificate

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1.2	Has the company clearly and unambiguously defined the HSE roles and responsibilities assigned to its personnel?	<input type="checkbox"/>	<input type="checkbox"/>	
1.3	Are HSE functions included in your company's organizational chart?	<input type="checkbox"/>	<input type="checkbox"/>	Please attach the organizational chart
1.4	Does the company identify and monitor compliance with HSE legal regulations?	<input type="checkbox"/>	<input type="checkbox"/>	
1.5	Does the company have a signed and valid HSE Policy?	<input type="checkbox"/>	<input type="checkbox"/>	
1.6	Does the company conduct regular occupational risk assessments for all workstations at least once every 3 years, or every time an accident occurs, or when there is a change in technology or the method of work performance?	<input type="checkbox"/>	<input type="checkbox"/>	
1.7	Do employees participate in HSE training regarding risk assessment, the HSE policy, and the procedures applied to the tasks they perform?	<input type="checkbox"/>	<input type="checkbox"/>	
1.8	Does the company communicate and consult on HSE matters with its employees?	<input type="checkbox"/>	<input type="checkbox"/>	
1.9	Does the company have a Permit to Work (PTW) system in place, and is it established by a formal procedure?	<input type="checkbox"/>	<input type="checkbox"/>	

2. Site HSE Management Program

	Question	Answer		Comment AL or Contractor
		Yes	No	
2.1	Does the organization have a process for formally documented HSE inspections/reviews/walkthroughs?	<input type="checkbox"/>	<input type="checkbox"/>	
2.2	Does the company conduct HSE assessments/reviews of its processes? (internal audits, reviews of processes, procedures, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
2.3	Has the company implemented a workplace cleanliness/housekeeping maintenance and improvement program, e.g., 5S, checklists, or a workplace tidiness policy?	<input type="checkbox"/>	<input type="checkbox"/>	

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2.4	Has the company implemented a disciplinary action process relating to HSE non-compliance/violations?	<input type="checkbox"/>	<input type="checkbox"/>	
2.5	Has the company implemented an incentive/motivation program based on HSE achievements?	<input type="checkbox"/>	<input type="checkbox"/>	
2.6	Does the company have a near-miss reporting system?	<input type="checkbox"/>	<input type="checkbox"/>	
2.7	Can the company confirm that it has not received any fines, summonses, or enforcement orders from regulatory authorities regarding HSE matters within the last 3 years?	<input type="checkbox"/>	<input type="checkbox"/>	
2.8	Does the company promote and encourage employees to exercise their right to refuse dangerous work / stop work in an emergency situation?	<input type="checkbox"/>	<input type="checkbox"/>	
2.9	Has the company previously collaborated/worked with Air Liquide?	<input type="checkbox"/>	<input type="checkbox"/>	<p>COMPLETED BY THE PERSON ISSUING THE AIR LIQUIDE PURCHASE REQUISITION:</p> <p>Rating on a scale from 1 to 10, where 1 is the lowest rating</p> <p>Rating: <input style="width: 50px; height: 20px; margin-left: 10px;" type="text"/></p>

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CONTRACTOR DECLARATION

I, the undersigned, representing the company:

- hereby declare that I have read and understood the Guidelines contained in Z01 to BHP/07/P - HSE Requirements for Contractors, and I hereby agree to abide by these principles,
- hereby undertake to communicate these principles to my personnel and to the personnel of any sub-contractors, and I undertake to enforce compliance with these principles.

I confirm that all the information provided above is true and accurate, and that I am authorized to represent the company in accordance with the National Court Register (KRS) or other power of attorney:

Name & Surname	
Position / Function	
Signature	
Date	

This document constitutes an integral part of the purchase order/contract.

This document, along with any required additional information, must be sent to the Air Liquide Companies' representative no later than 2 weeks prior to the commencement of work (or, in the case of regular updates for permanent Contractors employed under a contract, at least 2 weeks after the request for update is made). Late, incomplete, or failure to submit this document and/or the additional required information may be deemed by the Air Liquide Companies as a necessary and appropriate ground for contract termination.

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