

METHOD STATEMENT CHECK LIST

Ok....I

	CONTRACT NO:	OPERATION OF WORK:	TICK AS APPLICABLE		
	CONTRACTOR:		Yes	No	N/A
1	Name, Address and Phone number of Contractor				
2	Site Address [where work is to be carried out]				
3	Start date and time of duration of work				
4	Scope of work to be carried out				
5	Sequence of work [start and finish]				
6	Name and status of on-site person in charge				
7	Details [competency, qualifications etc.] of workforce				
8	Details of all plant and equipment to be used including certification				
9	Details of materials, substances to be used including specification				
10	Control measures to protect workforce, other site operatives and other persons, e.g. Client, public etc for risk arising from work				
11	Control measures to prevent falls, collapses of structures, materials, e.g. temporary works				
12	Details of emergency action, fire collapse, flood etc.				
13	Reference to assessments of COSHH, RISK, NOISE, MANUAL HANDLING				
14	Storage of distribution of materials				
15	PPE requirements, safety helmets, safety footwear etc.				
16	Inspection / Monitoring procedures including safety				
17	Name of person who wrote Method Statement				

Continue onto page 2 with any comments or requests for information

Item No.	Comments/actions regarding information provided/not provided
----------	--

METHOD STATEMENT CHECK LIST

--	--

Issued to

Sign and print name

Sign and print name

Of:

Safety & Environmental Advisor

Project/Contracts Manager