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18.13 FORM A - CONTRACTOR COMPETENCY VERIFICATION

Dear Subcontractor, The safety of staff and visitors is of paramount importance at this project.		
Name	Contact Number	E-mail Address
1.		
2.		
3.		
Safety Act, applicable Regulation health and safety program. In act safe work procedures with all we	ns, J-AAR's health and sa Idition, we will review t orkers prior to arrival or	will work in compliance with the Occupational Health an afety and environmental program, and our company's the Site-Specific Safety Plan (if available), and applicable in site and ensure proof of training is maintained. I by addendum shall work on this project in a supervisor
Signature	Title	Date