

CONTRACTOR PRE-QUALIFICATION DECLARATION

Isaac Regional Council is collecting personal information you supply on this form in accordance with the *Information Privacy Act 2009*. Your personal information will be used by Council officers who have been authorised to do so. The information will not be given to any other person or agency unless required by law or unless your permission is sought. Personal information will be handled in accordance with the *Information Privacy Act 2009*.

When to use this form – Contractors should complete this form if they have been engaged by Isaac Regional Council (IRC) and are to be onboarded to the IRC contractor management system. Contractor onboarding is a process that enables your company to self-manage the contractor registration process and maintain the records required to uphold your approval status as contractor.

SECTION 1 – CONTRACTOR REPRESENTATIVE DETAILS

The **Contractor Representative** is the company's nominated contact and is responsible for maintaining and ensuring the company's information within the Isaac Regional Council (IRC) contractor management system is up to date.

| | |
|-----------------------------------|--|
| REPRESENTATIVE NAME | |
| DATE OF BIRTH | |
| COMPANY NAME | |
| NATURE OF BUSINESS | |
| ADDRESS | |
| EMAIL (RECOMMEND GENERIC ADDRESS) | |
| WEBSITE | |
| CONTACT NUMBER | |
| COMPANY ABN | |
| IRC CONTACT | |
| PROJECT NAME (IF APPLICABLE) | |

SECTION 2 – COMPANY CERTIFICATION DETAILS

| | | |
|---|------------------------------|-----------------------------|
| Does the Company hold an AS4801 or IOS45001 OHS Management System? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the Company hold an ISO9001 Quality Management System? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the Company hold as ASO14001 Environmental Management System? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the Company have relevant up to date safety system to ensure work is completed safely? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Current copies of the above must be included when returning the completed declaration.

SECTION 3 – COMPANY INSURANCES

| | | | |
|---|------------------------------|-----------------------------|-----------------------------|
| Does the Company hold Workcover Insurance Certificate? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> NA |
| Does the Company hold Public and Product Liability Insurance Certificate? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Does the Company hold Professional Indemnity Insurance Certificate? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> NA |

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SECTION 4 – COMPANY WORKER COMPETENCY

| | | | |
|--|------------------------------|-----------------------------|-----------------------------|
| Are you and the company's workers appropriately licenced, qualified or certified where required? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Does the company confirm all its sub-contractors are competent and qualified to perform works for council? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> NA |
| Has the company ever been prosecuted by a Regulator? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> NA |

SECTION 5 – CHECKLIST BEFORE RETURNING

1. Any AS or ISO accreditations are attached.
2. All required insurances are attached.
3. All questions are answered.
4. This Declaration is signed and dated.

SECTION 6 – DECLARATION

I hereby certify that all information provided in the above submission is true and correct and understand that the provision of false information may result in termination of any agreement with council.

I understand that the company and I may be liable for any damage arising from the provision of incomplete, incorrect, or false information.

I understand that as the Contractor Representative I am responsible for maintaining and ensuring that the company's information within the IRC contractor management system is up to date.

I understand that as the contractor, the company will be responsible for ensuring the safety of all workers whilst on site, further abiding by the obligations under *Work Health and Safety Act 2011* and *Work Health and Safety Regulations 2011*.

| | | |
|----------------------------------|------------------|------------|
| CONTRACTOR REPRESENTATIVE | Signature _____ | Date _____ |
| | Print Name _____ | |

| | | |
|------------------------|------------------|------------|
| PROJECT MANAGER | Signature _____ | Date _____ |
| | Print Name _____ | |

Once completed, please send form and any attachments to:

safety.reports@isaac.qld.gov.au