

REGISTRATION OF PERSONNEL ON PROJECT

APPLIES TO ALL EMPLOYEES WHO PERFORM WORK ON THE PROJECT
USE BLOCK CAPITALS



The registration form is signed by manager (employer) and employee.

The employer keeps the original. The employee takes a copy for internal filing. The manager of the project takes a copy for the project file.

Project number and name:

Personal Details

(All fields must be filled in)

| | | | |
|-------------|------------------|----------------|---------------------|
| Name | Date of birth | ID card number | Expiry date ID card |
| Address | Postcode | Postal town | Telephone/mobile |
| Employer | Telephone | | |
| Next of kin | Telephone/mobile | | |

Language: *Applies only to foreign employees*

Nationality:

According to the Working Environment Act, the employer is required to ensure that the employee understands safety signs/directions/routines/rules

Speaks Scandinavian:

Yes

No

If no, action:

Understands Scandinavian:

Yes

No

If no, action:

Certificates/courses, documented training in accordance with regulations to Working Environment Act "Regarding organisation, management and participation" (CROSS OFF!)

| | | | | | |
|--|---------------------------------------|---|-------|-----------------------------|----------------|
| Completed mandatory safety training Module 1 | | YES <input type="checkbox"/> | Date: | No <input type="checkbox"/> | Deadline date: |
| - for all those who work on Veidekke's building and construction sites | | | | | |
| Driving licence class B: | Basic training in working environment | Machine driver's certificate: | | | |
| Work notification course no.: | Hot work expiry date: | Fork lift truck/crane driver's certificate: | | | |

State which licence is held beyond class B as well as which work notification course is held and what class of crane/machine is held.

| | | |
|--|------------------------------------|---------------------------------------|
| Workshop and warehouse, type: | Nail gun | Concrete saw, core drilling equipment |
| Special cranes, type: | Combi hammer/drill hammer | Wall saws |
| Winches and tackle | Chain saw | Wire saw |
| Hooking - strapping - signalling | Cutting/wood splitting/fencing saw | Floor and asphalt saw |
| Climbing and hanging scaffolding (36 h course) | Reinforcement connector | High-pressure hose equipment |
| Man lift class:..... | Vibrorod | Clearing saw and trimmer |
| Man lift underground | Hand-held reinforcement cutter | Piling and sheet piling equipment |
| Drill vehicles | Cutting torch | Mobile concrete pump equipment |
| Self-propelled roller | Rotary cutter | Safe use/control of scaffolding |
| Tractor equipment | Grinder | Safe use of formwork |
| Angle grinder/cutter | Woodworking machines | Fall safety equipment |
| Bolt gun | Asphalt work | First aid course: Date: |
| Other: (describe) | | |

Protective equipment: Confirmed issued and brought to project

Mandatory protective equipment: Helmet (Standard: EN 397) and protective footwear (Standard: EN 345 (EN ISO 20345)) with penetration-resistant soles. Always available: Hearing protection, eye protection, work gloves and if needed: Breathing protection, chemical/cut-reducing/special gloves and high-visibility clothing.

Date, signature

Signed by employer before arrival at project:

| | |
|-------|-----------|
| Date: | Employer: |
|-------|-----------|

Have made the employee aware of the HSE requirements Ref . Coordination of HSE B9.2.1-01

Module 2: Information and review of project

Applies only to own employees and hired personnel (Cross off):

| | |
|--|--|
| | Informed about follow-up of absence, alternative work in the event of injury/illness, AKAN (the workplace advisory centre for issues relating to alcohol, drugs and addictive gambling), notification routines for illness and injury. |
|--|--|

Applies to everyone on the project (Cross off and sign):

| | |
|--|---|
| | Completed mandatory safety training on the project (Module 2). (Issued helmet badges where these are used). |
| | Received badge for approved Module 1 and fixed this to helmet |
| | The employee is aware of Veidekke's pattern of reaction to breach of safety regulations. |
| | Issued with non-conformance block and Risk Assessment – "Block – ongoing risk assessment" |
| | Made aware of client's health & safety plan - information board |

Date, signature

Signed after review of Module 2 on the project:

| | | |
|-------|---------------|--|
| Date: | The employee: | Responsible for introduction to the project: |
|-------|---------------|--|