



JOB CARD FOR EXTERNAL COMPANIES

Activity: _____

Contractor: _____

Name: _____

Date: _____

Time (from until): _____

SAH Officer: _____

Tel.-Nr.: _____

Hazards:	Yes	Measures
1. Work at height (risk of falling)		
2. Electricity hazard		
3. Hazardous substances		
4. Noise		Wear hearing protection
5. Hot work (welding, flexing...)		Hot work permit
6. Work in confined spaces/shafts		Flagman
7. Hot surfaces		
8. Moving transport equipment		
9. Hazard due to machinery		
10. Reciprocal hazards		External company coordination
11. Other		

Obtain approvals before commencing work	Yes	Note
a) Hot work permit		
b) Driving licence, type		

Work area released by customer: _____
 Date _____ Time _____ Signature _____

Work area accepted by contractor: _____
 Date _____ Time _____ Signature _____

Work completed by contractor: _____
 Date _____ Time _____ Signature _____

Work area accepted by SAH: _____
 Date _____ Time _____ Signature _____

- Original for customer
- Copy for contractor