

Site Specific Induction Checklist

INDUCTEE NAME: PHONE NO:

EMAIL: COMPANY:

EMERGENCY CONTACT: EMERGENCY PHONE:

MANAGER'S EMAIL: MANAGER'S NAME:

Site Roles & Contacts - WNR, Vestas & Farm Supervisors	Y,N,NA
Office/Workshop/Compound Layouts - Restricted access areas, toilets, workshops, emergency accommodation, kitchen, offices, housekeeping etc	
Emergency Procedures and Equipment Locations - Location and use of the attendance registration system, emergency response plan, first aid kits, extinguishers, defib unit, muster points.	
Site Communications - Telephone/Radio/Internet	
Site Specific Hazards - Restricted electrical areas, vehicle and machinery use, farming activities, natural features e.g. cliffs, site alerts and short term project hazards	

I understand that access to this site is provisional and is only granted if I comply fully with the Site Supervisors, and Health, Safety and Environment systems that operate at the site as outlined in this induction.

SIGNATURE OF INDUCTEE:

SITE: DATE OF INDUCTION: EXPIRY DATE OF INDUCTION:

INDUCTION FACILITATOR: SIGNATURE:

ADMIN ONLY – Induction facilitator to complete the following table relating to site keys, gate access cards.

	Y	N	Numbers		
Key					
Access Card					

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