

## Contractor Acknowledgement of Safety Statement & commitment to Accident Reporting

Contractor Name (Print) \_\_\_\_\_

Contractor Business Name (if applicable) \_\_\_\_\_

I wish to acknowledge receipt of the following SWS Forestry Ltd. documents:

1. Safety Statement, Rev. 5, Jan 2017
2. Field Based Risk Assessment, Rev. 6, Feb 2017

I confirm that I have read, understand and accept their contents and will abide by all the rules and procedures contained within them when carrying out work on behalf of SWS Forestry Services Ltd.

Contractor Signature \_\_\_\_\_

Date \_\_\_\_\_

In the event of an incident, accident or near miss I agree to notify the Forester Manager within SWS Forestry so that the incident can be recorded and a risk assessment can be carried out to prevent future occurrences.

Contractor Signature \_\_\_\_\_

Date \_\_\_\_\_