**APPENDIX 06**

(To be submitted by contractor to contractor holder every month who will review and endorse and send to HSSE)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Month | |  | | Date: | | | | | |
| Contractor Name | |  | | Contract Title | | | | | |
| User Dept.: | | |  | | | | | | |
| Contractor Final HSE Plan | |  | Yes | |  | NO |
| S.  No | Items | | | Month | | | YTD | | |
| 1 | Number of employees working on the contact: | | |  | | |  | | |
| 2 | MAN-HOURS worked (including any overtime) | | |  | | |  | | |
| 3 | Number of FATALITIES | | |  | | |  | | |
| 4 | Number of LOST Time injury (LTI) | | |  | | |  | | |
| 5 | Number of RESTRICTED WORK CASES ( RWC) | | |  | | |  | | |
| 6 | Number of MEDICAL TREATMENT CASES (MTC) | | |  | | |  | | |
| 7 | Number of FIRST AID CASES: (FAC) | | |  | | |  | | |
| 8 | Number of NEAR MISSES Reported (NMs) | | |  | | |  | | |
| 9 | Number of UNSAFE ACTS / CONDITIONS | | |  | | |  | | |
| 10 | Quantity of hazardous waste generated (Kg): | | |  | | |  | | |
| 11 | Number of Chemical/ Oil spills incidents | | |  | | |  | | |
| 12 | Number Of Fire incident | | |  | | |  | | |
| 13 | Number hours for HSE trainings. | | |  | | |  | | |
| 14 | Number of TOOLBOX TALKS | | |  | | |  | | |
| 15 | Number of HSE INSPECTIONS/AUDITS | | |  | | |  | | |
| 16 | Number of HSE MEETINGS | | |  | | |  | | |
| 17 | Number of EMERGENCY DRILLS | | |  | | |  | | |
| 18 | Number Contractor Management Tour at QAPCO site | | |  | | |  | | |
| 19 | Number of JSA carried out prior to initiating hazardous tasks | | |  | | |  | | |
| Signature Of Contractor | | | | Signature of Contract Holder | | | | | |
|  | | | |  | | | | | |