

# South Wales Safety Consultancy Limited

## SITE NOTIFICATION FORM

<b>Company Name:</b>		<b>Contract Number:</b> (where applicable)	
<b>Site/ Workplace Address:</b> (Including Postcode)		<b>Brief Description or Work:</b>	
<b>Role :</b> (e.g. Principal Contractor, Sub-contractor, Client, etc.)		<b>Required Frequency of Visits:</b> (e.g. Monthly, Weekly, etc.)	
<b>Start Date:</b>		<b>Required Frequency of Visits:</b> (e.g. Monthly, Weekly, etc.)	
<b>Site Manager/ Contract:</b>		<b>Site Telephone/ Mobile No:</b>	
<b>Any Special Instructions:</b> e.g. Specific visit dates/ times, site access restrictions, etc.			
<b>Additional Information:</b>			

Additional Services From SWSC:	Required? Yes/No	Details:	Additional Services:	Required? Yes/No	Details:
Site safety document pack (Request an order form or download from <a href="http://www.swsconsultancy.com">www.swsconsultancy.com</a> )			Assistance with site documentation e.g. Construction Phase Plans, Risk Assessments, Method Statements.		
Induction Training:			Scaffolding Inspections		
Tool-box Training:			Other		

<b>Requested By:</b>		<b>Signature:</b>	
<b>Position:</b>		<b>Date:</b>	

PLEASE RETURN COMPLETED FORM TO SOUTH WALES SAFETY CONSULTANCY LIMITED'S OFFICES  
FAX-029 2069 2768 or EMAIL - [sites@swsconsultancy.com](mailto:sites@swsconsultancy.com)