|  |
| --- |
| *<Business name> requires some information about your business for safety and compliance purposes. To help ensure we have a safe and productive relationship, please tell us about the transport activities you have the capacity to influence and control.**Please return the completed checklist with copies of any other supporting documents to <Enter email address> marked to the attention of <Enter business representative name>.* |

# Section 1 – Business details

|  |  |  |  |
| --- | --- | --- | --- |
| Business/Owner name: |  | **ACN:** |  |
| Trading name (if applicable): |  |
| Postal address: |  |
| Contact person: |  | **Position:** |  |
| Mobile number: |  | **Email address:** |  |
| Describe your business and the transport activities that you are involved in: |  |

# Section 2 – Business accreditation/certification details

*(List current accreditations if applicable, e.g. NHVAS, AS/NZS 4801 Certification, Quality Certification, Safe Foods)*

| Certification/Accreditation name | Certificate/Accreditation number | Expiry date |
| --- | --- | --- |
|  |  |  |
|  |  |  |

# Section 3 – Transport activities your business has the capacity to influence and control:

| **The capacity of your business to influence and control the following transport activities:***To ensure that our transport task is carried out safely, please complete the questions in the checklist below so we can gain an understanding of the systems and processes you have in place to manage the hazards and risks associated with transport activities that you have the capacity to influence and control.* |
| --- |
| ***CAPACITY - The ability of someone to have an effect on something or the behaviour of someone else.******CAPACITY - In this context means the ability to control, eliminate or minimise the risk.*** |
| **1. Driver licensing, vehicles and vehicle maintenance** |
| 1.1 Is your business responsible for or does it have the capacity to influence and control **driver licensing**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure driver licences are current and drivers only drive vehicles applicable to their licence class. |
| Response: |  |
| 1.2 Is your business responsible for or does it have the capacity to influence and control **vehicle registrations**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to track vehicle registrations to ensure they’re current. |
| Response: |  |
| 1.3 Is your business responsible for or does it have the capacity to influence and control **vehicle maintenance**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure heavy vehicles under your control are maintained and roadworthy. Your response should also explain the training of drivers and other involved parties so they understand their responsibilities relating to daily checks and fault reporting and maintenance requirements. |
| Response: |  |
| 1.4 Is your business responsible for or does it have the capacity to influence and control the requirement for **heavy vehicle gazette notices and permits including the requirement to train drivers in the notice and permit conditions**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure your business is aware of, and applies for specific heavy vehicle notices and permits when required. Also describe how drivers are made aware of the conditions listed in these notices and permits. |
| Response: |  |
| 1.5 Is your business responsible for or does it have the capacity to influence and control **the location a heavy vehicle can travel too or routes a heavy vehicle can travel on**?(For example: B-double and road train routes, specific access permit to your site.) |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure your business is aware of, and applies for, any specific heavy vehicle routes that are applicable to the locations and vehicle types you operate. Also describe how drivers are made aware of these specific heavy vehicle routes and any special conditions that are applicable to these routes. |
| Response: |  |
| **2. Mass, dimension, loading and load restraint** |
| 2.1 Is your business responsible for or does it have the capacity to influence and control **mass and dimension**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure heavy vehicles you control or engage do not exceed mass and dimension limits. |
| Response: |  |
| 2.2 Is your business responsible for or does it have the capacity to influence and control **container weight declarations**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure heavy vehicles you control or engage to carry containers have a compliant container weight declaration. |
| Response: |  |
| 2.3 Is your business responsible for or does it have the capacity to influence and control **loading and unloading safely**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure vehicles you control or engage are loaded and unloaded safely. |
| Response: |  |
| 2.4 Is your business responsible for or does it have the capacity to influence and control **loading and unloading delays**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to notify drivers about delays when loading and unloading. |
| Response: |  |
| 2.5 Is your business responsible for or does it have the capacity to influence and control **load restraint**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure loads are restrained appropriately and safely. |
| Response: |  |
| **3. Vehicle speed** |
| 3.1 Is your business responsible for or does it have the capacity to influence and control **vehicle speed**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure your business does not directly, or indirectly, cause or encourage drivers of heavy vehicles to exceed the posted speed limits. |
| Response: |  |
| 3.2 Is your business responsible for or does it have the capacity to influence and control **speed limiters**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system to ensure your vehicle speed limiters are working as intended and not being tampered with. |
| Response: |  |
| **4. Driver fatigue** |
| 4.1 Is your business responsible for or does it have the capacity to influence and control **scheduling and rostering**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe your system for scheduling and rostering drivers and vehicles. |
| Response: |  |
| 4.2 Is your business responsible for or does it have the capacity to influence and control **trip planning**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe the system your business uses for trip planning. |
| Response: |  |
| 4.3 Is your business responsible for or does it have the capacity to influence and control **fitness for duty**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe the system your business uses to ensure drivers are fit for duty. |
| Response: |  |
| 4.4 Is your business responsible for or does it have the capacity to influence and control **driving hours**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe the system your business uses to ensure drivers comply with lawful driving hours. |
| Response: |  |
| **5. Training and education** |
| 5.1 Is your business responsible for or does it have the capacity to influence and control **site inductions**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe the system your business uses for inducting other involved parties who are carrying out transport activities on your behalf. |
| Response: |  |
| 5.2 Is your business responsible for or does it have the capacity to influence and control **safety management system training**? |
|[ ]  No | Move to next question. |
|[ ]  Yes | Describe the system your business uses to inform other involved parties about relevant SMS information at your site. |
| Response: |  |

# Section 4 – Other supporting documents

*Please provide copies of the following documents if applicable (click the checkbox to confirm you have supplied a current copy):*

|  |
| --- |
|[ ]  Business registration certificate |
|[ ]  Public liability insurance |
|[ ]  Workers compensation (WorkCover) insurance |
|[ ]  Business accreditation/certification certificates |
|[ ]  Other relevant documentation (Audit report, Safety Policy, etc.)Attached for your information: |

|  |
| --- |
| *Please send this completed checklist and other supporting documents to <Enter email address> marked to the attention of <Enter business representative name>.**<Business name> thanks you for taking the time to complete and submit our Third Party Engagement Checklist. We will review the information and documents you have provided and advise the outcome of our review in due course.**We recognise that your privacy is very important and we are committed to protecting the privacy of the information we collect from you. The Privacy Act 1988 governs the way in which we must manage your personal information.* |