



**OCCUPATIONAL HEALTH AND SAFETY ACT AND REGULATIONS
FOR CONSTRUCTION PROJECTS**

ACKNOWLEDGEMENT FORM

As an Employer, I understand that under the Occupational Health and Safety Act, all employees on a construction site must be trained in WHMIS and Fall Prevention.

I understand that in accepting employment on a Taplen Commercial Construction Inc. project, I am expected to abide by these regulations, and as such, confirm that all employees reporting to me on this project have been fully trained in WHMIS and Fall Prevention.

COMPANY: _____

NAME: _____

PROJECT: _____

SIGNATURE: _____ **DATE:** _____



SUBCONTRACTOR'S COMPETENCY
AND
HEALTH & SAFETY ACKNOWLEDGMENT

THIS IS TO ATTEST THAT THE UNDERSIGNED IS A COMPETENT CONTRACTOR AS DEFINED IN THE OCCUPATIONAL HEALTH AND SAFETY ACT OF ONTARIO;
OHSA - Section 1 "competent person";
OHSA - Regulation 213 (Construction) Section 1 "competent person"

THE UNDERSIGNED ALSO ACKNOWLEDGES THAT ALL EMPLOYEES WILL FOLLOW **Taplen Commercial Construction Inc.'s** (CONSTRUCTOR) HEALTH AND SAFETY SITE SPECIFIC PROGRAM;

AND

THE UNDERSIGNED WILL PERSONALLY ENSURE THE FULL COMPLIANCE OF THE ONTARIO OCCUPATIONAL HEALTH AND SAFETY ACT AND ALL ITS PERTINENT REGULATIONS.

CONTRACTORS NAME: _____

ADDRESS: _____

JOB LOCATION: _____

PROJECT NUMBER: _____

SIGNATURE: _____

NAME & TITLE: _____

DATE: _____



WSIB COMPLIANCE CERTIFICATION

As a Subcontractor engaged by the Contractor, Taplen Commercial Construction Inc. (Taplen), I hereby certify the compliance of our firm to the requirements of the Ontario 1997 Workplace Safety and Insurance Act. I further acknowledge that it is the Subcontractor's responsibility to ensure that any and all independent operators and sub-subcontractors engaged by our firm to work on the Contractor's work site shall be in compliance with the Workplace Safety and Insurance Act 1997 and the Workplace Safety and Insurance Board policies.

I accept that the Contractor may at any time require proof of compliance from any independent operators and sub-subcontractors engaged by our firm on the Contractor's project work site.

COMPANY: _____

NAME: _____

PROJECT: _____

SIGNATURE: _____ DATE: _____