

RECORD OF CDM WORKS SCHEDULED FOR CONTRACTORS' AND LBHF PROPERTIES OPERATIONS (SCDM WORKS FORM HS1)

PART A					
Property/ School:		Address:			
Brief description of work:		LBHF School Contact:			
		Start date:	Finish date:		
Principle contractor: Address:		Contractor's Contract Manager:			
Tel no:					
PART B					
PROJECT TYPE	A: Small works -Office redecoration, paint, carpet, lights	B: Minor works -Partition walls, lab benching, mechanical vent, paint, flooring, lights	C: Minor works- Partial refurbishment and change of use of a floor including partitioning, new toilets	D: Major capital Full refurbishment	
(Select one)					
LOCATION OF WORKS					
WORKS BEING SCHEDULED					
CONSTRUCTION PHASE HEALTH & SAFETY PLAN / RISK ASSESSMENT / METHIOD STATEMENT are in place prior to works approval (please attach)					
Other requirements (Such as planning permission from Building Control)					
Confirmation of Information supplied to contractor	Asbestos Survey	0	Accident Reporting Procedures	0	
	First Aid Arrangements	0	Security Information/ DBS	0	
	Emergency Evacuation Procedures	0	Permit Information	0	
Authorisation Signature of school representative:			Date:		
Signature of Contractor's representative:			Date:		

This form must be completed and submitted (**4 weeks in advance of start date**) to LBHF Children's Services Properties & Corporate H&S at CorporateHealthandSafety@lbhf.gov.uk prior to works commencing.