



## APPENDIX C

# EHS CONTRACTOR QUALIFICATION QUESTIONNAIRE

SGI is committed to 1) providing a safe and healthy workplace for all employees, contractors and neighbors and 2) conducting business in a manner that manages environmental issues responsibly. Only those contractors who have demonstrated management leadership and systems resulting in excellent environmental, safety and health performance will be used. Please complete this questionnaire in its entirety and return to Art Hebert in SGI purchasing at fax# 715-726-4491.

### SECTION I

To qualify to perform on-site work for SGI, contractors must:

- Have a documented ENVIRONMENTAL, HEALTH & SAFETY program that meets government requirements applicable to your work.
- Have a company substance abuse policy.
- Adhere to SGI's Environmental Policy outlined in SECTION II.
- Adhere to SGI's Contractor Responsibilities, which are documented in SGI's Contractor Environmental, Health & Safety Program and outlined here in SECTION II.
- Agree that all subcontractors employed by the contractor on SGI work will meet the requirements listed here and will submit to SGI a suitable contractor qualification questionnaire.
- Agree that all contractor employees and visitors to SGI facilities communicate in English with a level of proficiency, and to the extent necessary, to ensure their safety and the safety of others.
- Provide supporting ENVIRONMENTAL, HEALTH & SAFETY information as requested to verify the contractor's ability to comply with applicable SGI environmental, health and safety requirements.
- Agree to be subjected to a random Compliance Audit.

In addition, contractors should:

- Have a Workers' Compensation Experience Modification Rate (EMR) of 1.0 or less for the last 3 years. Must be verified by workers' compensation insurance provider, via a letter on their letterhead.
- Have an OSHA/BLS Recordable Injury Frequency Rate (RIR) equal to or less than 10.



- Have a Lost Work Day Injury Frequency Rate (LWR) equal to or less than 5.

If you need assistance in completing this form, please contact:

Name: Julie Kreger King

Phone: 530-759-0449 Email: jkreger@sgi.com

## SECTION II

### SGI's Environmental Policy

SGI recognizes the importance of conducting business and managing environmental issues in a responsible manner. We are committed to minimizing our environmental impact. Therefore, we use the following principles to guide our efforts:

- Comply with environmental regulations
- Conduct operations in an environmentally sound manner
- Apply the principles of "reduce, reuse, and recycle" in all processes
- Promote environmental responsibility among employees
- Ensure that suppliers agree to comply with environmental regulations
- Pursue continuous improvement in our environmental performance
- Clearly communicate SGI's environmental policies, practices and impact to interested parties.

### Contractor Responsibilities:

- Taking precautionary measures necessary to ensure that SGI employees and property are protected.
- Following all regulations, codes and other legal obligations regarding the performance of the work.
- Briefing employees on any unique or unseen hazards that they may encounter on their job site.
- Ensuring that employees and subcontractors have received appropriate training and are competent to perform assigned work.
- Providing written documentation for employee training activities, insurance and injury experience to SGI when requested.
- Providing personal protective equipment (PPE) and other necessary equipment to all employees working in areas/operations requiring PPE.
- Providing all equipment necessary to perform the contracted work.
- Supplying copies of Material Safety Data Sheets for all chemicals prior to bringing on-site.
- Removing (and properly disposing of) all chemicals and empty chemical containers brought on-site.
- Implement and comply with SGI's Contractor EHS Program.
- Immediately reporting any hazards, accidents or incidents to the SGI Project Manager or Security.



SECTION III

EHS CONTRACTOR QUALIFICATION QUESTIONNAIRE

1) Company Details

Firm's Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

2) Company Contact

Bid Request: \_\_\_\_\_ Title: \_\_\_\_\_

3) Company Management Under Current Management Since \_\_\_\_\_

4) Number of Permanent Company Personnel Including:

Admin: \_\_\_\_\_ Field Supervision: \_\_\_\_\_ Eng & Design: \_\_\_\_\_

Normal Field Construction Workers (per week): \_\_\_\_\_ Others: \_\_\_\_\_

5) Interstate or Intrastate Workers' Compensation Experience Modification Rate (as shown on Workers' Compensation Insurance Policy) for the last three years.

Year: \_\_\_\_\_ EMR: \_\_\_\_\_

Year: \_\_\_\_\_ EMR: \_\_\_\_\_

Year: \_\_\_\_\_ EMR: \_\_\_\_\_

6) OSHA/BLS Recordable Injury Frequency Rate (RIR) for the last three years. (RIR is defined as the total number of OSHA recordable incidences divided by the total number of hours worked by all employees for the year x 200,000.)

Year: \_\_\_\_\_ RIR: \_\_\_\_\_

Year: \_\_\_\_\_ RIR: \_\_\_\_\_

Year: \_\_\_\_\_ RIR: \_\_\_\_\_

7) OSHA Lost Work Day Injury Frequency Rate (LWR) for the last three years. (LWR is defined as the the total number of injuries resulting in lost work days or restricted activity divided by the total number of hours worked by all employees for the year x 200,000.)

Year: \_\_\_\_\_ LWR: \_\_\_\_\_

Year: \_\_\_\_\_ LWR: \_\_\_\_\_

Year: \_\_\_\_\_ LWR: \_\_\_\_\_

8) Has your company been cited by OSHA or EPA in the last 3 years: ( ) YES ( ) NO



9) If so, please provide information on the citation:

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10) Will you be using any chemicals on SGI premises? ( ) YES ( ) NO

If so, please describe the types and locations where they will be used:

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11) Will you be generating any air emissions while on site? ( ) YES ( ) NO

If so, please describe: \_\_\_\_\_

12) Will you be generating any wastewater while on site? ( ) YES ( ) NO

If so, please describe: \_\_\_\_\_

13) Will you be generating any hazardous waste while on site? ( ) YES ( ) NO

If so, please describe: \_\_\_\_\_

14) Will you be disturbing soil, adding new facilities or equipment, or modifying the facility in any way? ( ) YES ( ) NO

If so, please describe: \_\_\_\_\_

15) Under what North American Industry Classification System (NAICS) code is your work classified: \_\_\_\_\_

16) Attach the Following:

- Copies of OSHA 300 / 300A Log for the three most recent years.
- Verification by your insurance carrier of the Workers' Compensation Experience Modifier Rate for the three most recent years.

17) Safety Policies and Procedures

a. Do you have a documented safety policy and program? ( ) YES ( ) NO

b. Do you have a Safety Officer / Department in your company? ( ) YES ( ) NO

If yes, Name: \_\_\_\_\_ Telephone Number \_\_\_\_\_

c. Do you employ full time safety supervision on all job sites? ( ) YES ( ) NO

d. Do you have a Personal Protective Equipment Policy or Program? ( ) YES ( ) NO

If yes, what does it cover? \_\_\_\_\_

e. Does your safety program address all OSHA standards as they apply to contractors and to your particular industry? ( ) YES ( ) NO

18) Safety Training

a. What type of safety orientation training do you provide for new hires?



- ( ) Film/Video ( ) Slides ( ) Handbook ( ) Verbal ( ) Other
- b. Topics included in Orientation: \_\_\_\_\_
- c. Do foremen/supervisors receive formal safety training? ( ) YES ( ) NO
- Specific Topics: \_\_\_\_\_
- d. Are your foremen/supervisors trained in:  
( ) First Aid ( ) CPR ( ) Emergency Rescue
- e. Are job site foremen's/supervisor's safety meetings required? ( ) YES ( ) NO
- f. Are weekly toolbox safety meetings required? ( ) YES ( ) NO
- g. Are regular safety / housekeeping audits conducted? ( ) YES ( ) NO

19) Safety Auditing and Incident Investigation

- a. Describe your accident investigation procedure?  
\_\_\_\_\_  
\_\_\_\_\_
- b. How does senior management participate in the accident investigations?  
\_\_\_\_\_  
\_\_\_\_\_
- c. How do project managers participate in accident investigations?  
\_\_\_\_\_  
\_\_\_\_\_
- d. Do you require subcontractors to meet the same safety ( ) YES ( ) NO standards you employ?
- e. What level of management in your company receives field safety reports? \_\_\_\_\_

20) Please list the name of the individual responsible for environmental issues at your company, and his/her title? \_\_\_\_\_

21) Please list the subcontractors you expect to use on this contract (if not enough space, please attach a sheet):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



22) Signature of Company Officer

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name printed	title
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signature	date
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