fea

Fea Contractor Monthly HSE Performance Report

1. Contract De	tails					
Contract Name						
Contractor:		Month:				
Prepared By:		Date:				
2. Performanc	e Indicators					
Indicator		Current	Cum. To		Mthly	
Number of lost time injuries		Month		AVe	erage	
Working days lost d						
Number of personne	• •					
plans	rootmont in invited					
Number of first aid t Number of hazard ir						
conducted	ispections/reports					
Number of safety meetings/forums						
conducted Number of induction	ns completed					
3. Incident Det	-					
Date of Incident Description				Days Lost		
	2 3331 17 11 311					
4 OHE Correct	tivo Actions					
4. OHS Corrective Actions				eports or inspections) Status		
item ivo.	Description) i i	Level	Open	Closed	
5. Comments						
Signed						
			-			
Contractor Rep		te	Fea	Rep		
Form No:HSE41C33 Rev.2		Custodian: Unit Leader HSE				
Created: July 2007		Last Review July 2009			Next Revie	