



BY FARMERS.
FOR FARMERS

CONTRACTOR INDUCTION

FARM NAME: CONTRACTOR:
PROJECT OR TASK:
EXPECTED DURATION OF WORK: FROM: TO:

Contractor contact details

Mobile number: Emergency contact:
Business address:

As a contractor we expect you to comply with all policies and all instructions given to you by farm employees. By signing this form you are confirming that you have been through with the Farm Owner/Manager (or representative) all the items listed below and that you and your employees agree to comply with all farm policies while on this property.

Items to cover

TICK TO CONFIRM

Confirm where the contractor will be going and what they will be doing	<input type="checkbox"/>
Determine approximate time the contractor will be entering and exiting	<input type="checkbox"/>
Advise the contractor of any risks to their safety on the way to and in the area that they will be working. Physically show the contractor if necessary	<input type="checkbox"/>
Advise the contractor of farm rules (e.g. speed limits and alcohol) and expectations of their behavior on farm	<input type="checkbox"/>
Discuss how an emergency event would be managed and what help they might need (i.e. phone line out)	<input type="checkbox"/>
Contractor has confirmed they have a safety management system that covers the work they are there to do	<input type="checkbox"/>
Contractor has confirmed they are competent and equipped to do the work	<input type="checkbox"/>
Contractor has explained any risks that their work poses to others and how that will be managed to ensure their safety	<input type="checkbox"/>
Contractor has confirmed they will notify the farmer of any new hazards they observe or create while doing the work	<input type="checkbox"/>
Contractor has confirmed that they will notify the farmer of any serious accidents or incidents that occur whilst the work is done.	<input type="checkbox"/>

Notes:

FARM MANAGER'S SIGNATURE:

CONTRACTOR'S SIGNATURE:

DATE OF INDUCTION

VALID FOR 12 MONTHS