

CONTRACTOR DETAILS FORM TEMPLATE

To be used with the Contractor Induction SOP. Use this template to record contractor details on file.

HEADING	POLICY
1. Purpose	Farm name: _____ We are up-dating our records of contractors who provide services on our farm. Please provide us with the information below, by emailing or faxing this form to: E-mail: _____ Fax: _____
2. Contractor details	Company name: _____ Contact person: _____ ABN: _____ Licence: _____ Registration no. (if applicable): _____ Address: _____ _____ _____ Phone number: _____ Mobile: _____ E-mail: _____ Services Provided: _____ _____ _____ _____
3. Relevant insurances	Relevant insurances you hold (Insurer / Policy Number / Cover / Expiry Date) _____ _____ _____ Public Liability: _____ Workers Compensation: _____ Other: _____ Signature: _____ _____ Date: _____ _____

The information provided is a guide only - professional advice should be sought about your specific circumstances and compliance requirements.