

Project number: <i>[Fill in the project number]</i> Project name: <i>[Fill in the project name]</i>	<i>[Paste in the company logo]</i>
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Checklist AH.09: Commencing work with third parties

Section 0: to be filled out by Nyrstar			
Nyrstar Site Manager (Name + Phone number)		Nyrstar Project Manager (Name + Phone number)	
Shift contact (Name + Phone number)			
EMERGENCY PHONE NUMBERS			
• Fire: <ul style="list-style-type: none"> Internal number: 9400 +32 (0)14 819 400 Mobile Balen: +32 (0)477 774 441 Mobile Pelt: +32 (0)474 930 259 		• Accident: <ul style="list-style-type: none"> Internal number: 9300 +32 (0)14 819 300 Mobile Balen: +32 (0)477 774 441 Mobile Pelt: +32 (0)474 930 259 	
Signing in on site:			
<ul style="list-style-type: none"> Work permits are to be collected daily from the site manager Signing in and out of the department 			
Attached documents (select the attached documents)			
Annex 1	Balen factory map XY-000-PL-0-01828		
Annex 2	Pelt factory map XY-000-OPLM-0-00008		

DECISION: Nyrstar's site manager will perform the necessary checks to verify that this AH.09 is filled out completely and correctly and that all attachments are available. Next, the Nyrstar site manager must complete the following checklist. After which, the contractor's job manager will organise a toolbox talk* with all parties involved in this AH.09.

* The Nyrstar site manager must receive a copy of the list of participating parties within 24 hours.

<input type="checkbox"/>	Go	All risks and control measures are sufficiently contained. Work can begin.	
<input type="checkbox"/>	Go, conditional	Sections must be followed up on. In the meantime, work can begin.	
<input type="checkbox"/>	No go	Sections must be corrected before work can begin.	
Nyrstar: Name of site manager	Position	Date	Signature
Contractor: Name of project manager	Position	Date	Signature

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Section 1: Details: Check is performed by Nystar's site manager.			Check		
Order number:		Main contractor company name			
Max. number of employees on site		Subcontractor company name			
Location of work	<input type="radio"/> Balen <input type="radio"/> Pelt	Department			
Project start date		Project end date			
Contractor Project Manager (Name + Phone number)		Contractor Site Manager (Name + Phone number)			
Contractor Prevention Consultant (Name + Phone number)		TMB Safety Coordinator (Name + Phone number)			
Occupational Health Service		Accident insurance agency			
Social Security Number		SCC certificate no. Contractor			
No. Check in at work					
1.1 Short description/scope of the job: Check is performed by Nyrstar's site manager.			Check		
1.2 Attached Documents: Please specify which documents are N/A or OK. Check is performed by Nyrstar's site manager.			N/A	OK	Check
Annex 3	Risk Analysis & Evaluation based on operational tasks				
Annex 4	Hoisting plan (according to SR03)				
Annex 5	Excavation works (according to SR11)				
Annex 6	Demolition works (according to SR13)				
Annex 7	Safety Data Sheets (SDS) including the storage of hazardous substances (according to SR23)				
Annex 8	List of machinery including inspections reports				
Annex 9	List of lifting equipment including inspection reports				
Annex 10	List of electric equipment including inspection reports				
Annex 11	List of mobile work equipment including inspection reports				
Annex 12	List of fall protection including inspection reports				
Annex 13					
The documents must be added depending on the work.					

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Section 2: Work methods and order: Check is performed by Nyrstar's site manager.		Check
Describe the work method step by step, so that it is clear how the work can be carried out safely. Include photographs where possible.		
1		
2		
3		
4		
5		
6		
7		
8		
etc.		

Section 3: Equipment and machines to be used:			Check
Check is performed by Nyrstar's site manager.			
	Mobile crane		Standard hand tools
	Forklift		Welding equipment (type.....) / welding process
	Aerial platform		Manual hoist
	Telescopic handler		Augers
	Excavation machine		Electric hand tools
	Wheel loader		Grinders
			Cutting equipment (acetylene/oxygen)
			Gas burners
			Hoist/Lifting Equipment

Note: Check off the relevant items and add to the list above if necessary

Attention: The certificates and inspection reports for all machines and equipment must be available on SITE.

Section 4: Job details:			
4.1 Required personal certificates: Check is performed by Nyrstar's site manager.			Check
	Rigging and load removal		Working with independent respiratory protection
	Hoisting with a crane		Hoisting with a mobile crane
	Working with a forklift		Working as a confined space attendant
	Working with an aerial platform		BA5 Company-specific (Electrical works)
	Working with a telescopic handler		Welder
	Working with a wheel loader		
Note: Check off the relevant items and add to the list above if necessary Attention: The certificates and inspection reports must be available on SITE (digital versions are permitted).			
4.2 Specific PPE required(mention any additional PPE). Basic PPE → see SR01: Check is performed by Nyrstar's site manager.			Check

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4.3 High risk jobs: Your employees are familiar with the relevant Safety Regulations for this work: Please indicate what is applicable to you or not or OK. Check is performed by Nyrstar's site manager.	N/A	OK	Check
Working near molten metals (SR02)			
Use of hoisting equipment and cranes (SR03)			
Working at height (SR05)			
Working with an aerial platform or scissor lift (SR06)			
Construction of special scaffolding (SR07)			
Working in enclosed spaces (SR08)			
Locking (SR09)			
Working with fire hazards (SR10)			
Excavation work (SR11)			
Radiological work (SR12)			
Demolition work (SR13)			
Industrial cleaning (SR14)			
Working in ATEX areas (SR16)			
Electrical engineering work (SR17)			
Risk of contact with acids/bases. BUMB operation (SR20)			
Use of hazardous materials/ chemical cleaning agents (SR23)			
Working with asbestos (SR26)			
Blasting operations			
Working under, near or above water			
Working with explosives			
4.4 General Safety Instructions: Please specify which items are N/A or OK. Check is performed by Nyrstar's site manager.	N/A	OK	Check
SR01: Choice of PPE. When carrying out grinding work , a face shield with safety goggles underneath is required to protect the face.			
SR09: Locking. When locking things, all foremen must hang a blue identifiable lock which has the company name and the name of the foreman on it.			
SR21: Managing waste. When the job is finished, the place of work must be cleared up.			
SR25: Requirements for (electric) hand tools. All grinding discs must be equipped with a dead man's switch . Large grinding discs with a diameter of 180 mm or more must be equipped with a braking system and a slow start.			
4.5 Specific safety instructions: Please specify which items are N/A or OK. Check is performed by Nyrstar's site manager.	N/A	OK	Check
Have the area-specific risks been communicated?			
Has the asbestos register been consulted and the presence of any asbestos included in the risks (SR26)?			
Is the site well equipped and, if there is a site hut present, does it meet the requirements (SR24)?			
Is there a need for extra lighting and is this provided?			
4.6 Medical fitness of employees: Please specify which items are N/A or OK. Check is performed by Nyrstar's site manager.	N/A	OK	Check
Do all your employees have a medical approval to work?			
Is the measured value of lead in blood of all you employees less than 20 micrograms per dl of blood (SR18)?			
Is the measured value of Cadmium in your employees' urine less than 2 micrograms per gram of creatine (SR18)?			
Are all your employees non-asthmatic (SR27)?			
Are all your employees aware of the hygiene instructions?			

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4.7 Environmental requirements: Please specify which items are N/A or OK. Check is performed by Nyrstar's site manager.	N/A	OK	Check																				
Is the waste procedure known (SR21)?																							
Are the legal environmental requirements known, such as the Flemish Regulation Concerning Environmental Permits (VLAREM) in relation to: - Storage of gases and hazardous materials (SR23) - Inspections and licences, e.g. storage tanks, emergency generators, etc.																							
Which environmental risks have been identified and which management measures have been taken accordingly? Check is performed by Nyrstar's site manager.			Check																				
4.8 Describe the access and escape routes: Check is performed by Nyrstar's site manager.			Check																				
4.9 Environmental factors that can influence the safety of the job: Check is performed by Nyrstar's site manager.			Check																				
4.10 Required personal certificates: Check is performed by Nyrstar's site manager.			Check																				
How will any language problems be overcome?																							
What agreements have been made on the use of Nyrstar materials / vehicles																							
How is the work area defined (SR15)? Attach a zoning plan if possible.																							
4.11 Scaffolding (SR07): Check is performed by Nyrstar's site manager.		Check																					
<table border="1"> <thead> <tr> <th>Type of scaffolding</th> <th>Short description</th> </tr> </thead> <tbody> <tr> <td>Standard scaffolding (300 kg/m2)</td> <td></td> </tr> <tr> <td>Bridges longer than 6m</td> <td></td> </tr> <tr> <td>Suspended or extended scaffolding</td> <td></td> </tr> <tr> <td>Scaffold hoist (calculation drawing for >200 kg)</td> <td></td> </tr> <tr> <td>Use of mesh, tarpaulin or plating</td> <td></td> </tr> <tr> <td>Above 24 metres</td> <td></td> </tr> <tr> <td>Deviating pole distances or anchoring patterns.</td> <td></td> </tr> <tr> <td>Access and escape routes, including a motivation for the amount.</td> <td></td> </tr> <tr> <td>Scaffolding for a specific application</td> <td></td> </tr> </tbody> </table>	Type of scaffolding	Short description	Standard scaffolding (300 kg/m2)		Bridges longer than 6m		Suspended or extended scaffolding		Scaffold hoist (calculation drawing for >200 kg)		Use of mesh, tarpaulin or plating		Above 24 metres		Deviating pole distances or anchoring patterns.		Access and escape routes, including a motivation for the amount.		Scaffolding for a specific application				
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Section 5: Communication, monitoring & instruction		Check	
Check is performed by Nyrstar's site manager.			
Please indicate how you have demonstrably organised the following at the Nystar SITE			
1	Instructing employees on this AH.09*. How are new employees instructed on this?		
2	Toolbox Talks (including frequency)*		
3	LMRA		
4	Safety supervision		
* The Nyrstar site manager must receive a copy of the list of participating parties and the items discussed within 24 hours. All subcontractors must be authorised by Nystar prior to starting work.			

Section 6: Executing organisation's signature			Check	
Check is performed by Nyrstar's site manager.				
Approved by the responsible Contractor	Position	Date	Signature	

By signing this document, the executing organisation declares that::

- It complies with the NYRSTAR SITE REGULATION, including the NYRSTAR LIFE-SAVING RULES.
- This AH.09 form has been truthfully filled out.
- All foreseeable risks are known and are included in this AH.09.
- Work will be carried out in accordance with this AH.09. In case of deviations, this AH.09 will be revised.

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TOOLBOX :

DATE	NAME	SIGNATURE

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Note

If the sub-contractor carries out any high-risk work (see section 4.3), an AH.09 must be filled out by the sub-contractor. This AH.09 must be approved first by the main contractor and then by Nyrstar. The AH.09 is at all times demonstrably discussed with the executive staff and forms part of the work permit. All subcontractors must be authorised by Nyrstar.

General	<ul style="list-style-type: none"> The italicised locations must be filled in and the italicised text must be removed. The grey field must be copied and remain unchanged. Add the project name in the left-hand header. Add the company logo in the right-hand header.
Section 0	To be filled out by Nyrstar On a map, mark the area where the work will be carried out: to be provided by Nyrstar.
Section 1	<ul style="list-style-type: none"> Fill in the missing data 1. Give an outline of the work to be carried out 2. Indicate (using check marks) which attachments have been added
Section 2	Describe the work method step by step, so that it is clear how the work can be carried out safely. Include photographs where possible.
Section 3	Indicate (using check marks) which tools and machinery will be used. Add to the list if necessary.
Section 4	<ol style="list-style-type: none"> Indicate (using check marks) which certificates your employees possess to perform the tasks in question. Indicate whether additional PPE is required in addition to the standard and area-specific PPE (job dependent). Indicate (using check marks) which high risk activities will be carried out. Check the box if your employees are familiar with the relevant Safety Regulations. Indicate whether the specific safety instructions are known or not. Indicate if your employees are medically fit or if this item is not applicable. Indicate whether the environmental requirements are known or not applicable. Indicate whether there are sufficient access/escape routes and how it is ensured that these are kept clear. In addition to the risks of the job, are there any foreseeable risks to be expected from the environment? Indicate how the organisational aspects will be solved. Indicate (using check marks) information about the scaffolding.
Section 5	Fill in the missing data.
Section 6	The person in charge of the executing organisation of the (sub)contractor must sign for the work to be carried out in accordance with the completed AH.09. Note: In case of deviations in the execution, these must be approved prior to the work by means of an AH.09 revision application.