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| |  |  |  | | --- | --- | --- | |  | ECS Procedures  Pre-Construction Information | PP-053-PCI | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | **Estates & Campus Services (ECS)** | | | | | | | | | | | EHSF-003 | | | | |
| Pre-Construction Information Summary | | | | | | | | | | |
|  |  | | |  | | | | |  | | | | | | | |
| **Project Details** | | | | | | | | | | | | | | | | |
| Project Name & Location (in full) |  | | | | | | | | | | | | | | | |
| Project Scope of Work |  | | | | | | | | | | | | | | | |
| Project Manager |  | | Contact No. |  | | | | | | | | | | | | |
| Start & Completion Date | dd/mm/yyyy | | Duration in months |  | | Notifiable? | | | | | Yes | | |  | No |  |
|  |  | |  |  | | | | | | | | | | | | |
| **Appointments** – If there is more than one contractor involved then a principal designer and principal contractor **MUST** be appointed (Duty-holders) | | | | | | | | | | | | | | | | |
| Principal Designer Company (PD) | |  | | | | | | | | | | | | | | |
| PD Contact Name | |  | | | | | Contact No. | | |  | | | | | | |
| Designer (s) | |  | | | | | Contact No. | | |  | | | | | | |
| Principal Contractor (PC) | |  | | | | | | | | | | | | | | |
| PC Contact Name | |  | | | | | Contact No. | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Health Hazards** | | | | Yes | No | Information | | | | | | | | | | |
| Potential for disturbance of Asbestos-Containing Materials | | | |  |  |  | | | | | | | | | | |
| Works within a vacated laboratory or handling potentially contaminated / hazardous equipment | | | |  |  | PP-012-ADC - Area Decontamination Certificate will be required. | | | | | | | | | | |
| Works within an operational laboratory / Specialist areas still in use | | | |  |  | PP-013-CWC – Clearance to Work Certificate will be required. | | | | | | | | | | |
| Any potential of encountering biological hazards | | | |  |  | PP-012-ADC - Area Decontamination Certificate | | | | | | | | | | |
| Substances Hazardous to Health | | | |  |  |  | | | | | | | | | | |
| Works in vicinity of a radiation source (ionising/non-ionising) | | | |  |  | PP-013-CWC – Clearance to Work Certificate will be required. | | | | | | | | | | |
| Works within a Nuclear Magnetic Resonance (NMR) Room | | | |  |  | PP-013-CWC – Clearance to Work Certificate will be required. | | | | | | | | | | |
| Location will involve exposure to high levels of Vibration/Noise | | | |  |  |  | | | | | | | | | | |
| Workplace temperature likely to cause discomfort or health risks (hot or cold) | | | |  |  |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Workplace Hazards** | | | | Yes | No | Information | | | | | | | | | | |
| Is there a risk from Falling from height  Work envisaged requiring specialist access equipment | | | |  |  |  | | | | | | | | | | |
| Overhead obstructions potential to cause head injury, e.g. low cable trays, pipe-work etc. | | | |  |  | Consider increasing lighting levels and providing head protection etc. | | | | | | | | | | |
| Electrical and other live services | | | |  |  |  | | | | | | | | | | |
| Fragile materials / surfaces within vicinity of works | | | |  |  |  | | | | | | | | | | |
| Poor lighting levels should be anticipated within planned work area | | | |  |  |  | | | | | | | | | | |
| Works include the need to enter a Potential / Confined Space | | | |  |  |  | | | | | | | | | | |
| Significant manual handling risk may be present (in terms of building e.g. lift unavailable) and or Tower and or Mobile Crane (s) | | | |  |  |  | | | | | | | | | | |
| Hazardous associated with Buildings or Structures | | | |  |  |  | | | | | | | | | | |
|  | | | |  |  |  | | | | | | | | | | |
|  | | | |  |  |  | | | | | | | | | | |
| **Third Party Hazard** | | | | Yes | No | Information | | | | | | | | | | |
| Area liable to be Occupied by Students / Staff / Members of the Public / any special events on (Please state) | | | |  |  |  | | | | | | | | | | |
| Other contractors known to be working in immediate vicinity | | | |  |  |  | | | | | | | | | | |
| Vehicles Operating within the vicinity | | | |  |  |  | | | | | | | | | | |
| Machinery operating within the vicinity | | | |  |  |  | | | | | | | | | | |
|  | | | |  |  |  | | | | | | | | | | |
| **Fire & Emergency Hazards** | | | | Yes | No | Information | | | | | | | | | | |
| Work may / will impede on fire escape routes, (liaise with Fire Advisor / Fire Safety Manager) | | | |  |  |  | | | | | | | | | | |
| Works involve Hot Works (state who is to issue Hot Works Permit) | | | |  |  |  | | | | | | | | | | |
| Fire Detection Devices are located within the area | | | |  |  |  | | | | | | | | | | |
|  | | | |  |  |  | | | | | | | | | | |
| **Any Other Hazards** | | | | Yes | No | Information | | | | | | | | | | |
| Lone Working permitted? | | | |  |  |  | | | | | | | | | | |
| Subcontracting Permitted? | | | |  |  |  | | | | | | | | | | |
| Work will Require a University Issued Permit | | | |  |  | Issued by <INSERT NAME> | | | | | | | | | | |
| Work will require a University Issued Access Authorisation | | | |  |  | Issued by <INSERT NAME> | | | | | | | | | | |
| Parking Provision (please state) | | | |  |  |  | | | | | | | | | | |
| Material Storage Provision (please state) | | | |  |  |  | | | | | | | | | | |
| Others hazards not covered | | | |  |  | Identify below. | | | | | | | | | | |
|  | | | |  |  |  | | | | | | | | | | |
| Other Hazards | | | | Other Information | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | |
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|  | | | |  | | | | | | | | | | | | |
| This summary should be provided to the Contractor at TENDER stage (where feasible). It aims is to highlight “significant” risks originating from University premises or processes that the contractor may encounter during the work. It provides outline controls to mitigate these risks and directs them to more specific guidance covered in the Contractors Site Rules where applicable. If there is a risk present then the relevant control measure MUST be followed. | | | | | | | | | | | | | | | | |
| **Issued** | | | | Contact Name | | | | Date | | | | | Signature AP | | | |
| Principal Designer | | |  |  | | | |  | | | | |  | | | |
| Project Manager | | |  |  | | | |  | | | | |  | | | |

**Please place a copy of this form in the Health and Safety File once complete.**