HSEQ NOC FOR FIT-OUT / MODIFICATION WORKS

1: GENERAL INFORMATION



This form must be completed and submitted by the Main Contractor or Consultant for all Modification works. Fit out works & Modification works application must be made after the site has been established but before starting any site activities including removal of any existing fixtures.

CLIEN	CLIENT:									
Locat	tion/Area :									
Project Name : Plot		Plot Number	t Number :							
Representative :		Email Addres	Email Address :							
		Alternate Nu	Alternate Number :							
CONSULTANT NAME :										
Resid	dent Engineer :									
Telephone Number : Mobile N		Mobile Num	mber :							
РО В	ox:	Fax Number	:							
Emai	il Address :									
FIT-OUT MAIN CONTRACTOR:										
Proje	ect Manager :									
Telephone Number : Mobile Nu		Mobile Num	nber :							
P.O.	Box:	Fax Number	:							
Emai	il Address :									
2. DECLAPATION STATEMENT										
2: DI	FCLARATION STATEMENT									
	ECLARATION STATEMENT ereby confirm that the following DS HSE requirements I	have been complied	with:-							
		have been complied	with:-	NO	NA	REMARKS				
We h	ereby confirm that the following DS HSE requirements I	have been complied		NO	NA	REMARKS				
We h	ereby confirm that the following DS HSE requirements I DESCRIPTION			NO	NA	REMARKS				
We ho	DESCRIPTION First aid box is available on site.	ved 3rd party).		NO	NA	REMARKS				
We ho	DESCRIPTION First aid box is available on site. Certified first aiders are available on site (Approximate)	ved 3rd party). lable on site. n the site with		NO	NA	REMARKS				
We ho	DESCRIPTION First aid box is available on site. Certified first aiders are available on site (Approx Adequate numbers of fire extinguishers are available and Adequate lighting arrangements are done of	ved 3rd party). lable on site. n the site with onnections atory instruction		NO	NA NA	REMARKS				
We ho NO 1 2 3 4	DESCRIPTION First aid box is available on site. Certified first aiders are available on site (Approx Adequate numbers of fire extinguishers are available adequate protective covers and safe electrical corproject sign board, warning signs and manda signs, Emergency numbers are displayed on si	ved 3rd party). lable on site. n the site with onnections atory instruction ite at prominent		NO	NA	REMARKS				
We ho NO 1 2 3 4 5	DESCRIPTION First aid box is available on site. Certified first aiders are available on site (Approx Adequate numbers of fire extinguishers are available adequate lighting arrangements are done of adequate protective covers and safe electrical corproject sign board, warning signs and manda signs, Emergency numbers are displayed on si locations including the main entrance. Area (covering) fencing is provided and meaning and signs are displayed and meaning signs and manda signs.	ved 3rd party). lable on site. n the site with onnections atory instruction ite at prominent asures taken to on the site as per		NO	NA NA	REMARKS				

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HSEQ NOC FOR FIT-OUT / MODIFICATION WORKS



2: DECLARATION STATEMENT										
We hereby confirm that the following DS HSE requirements have been complied with:-										
NO	DESCRIPTION		YES	NO	NA	REMARKS				
9	Site specific risk assessments and method statements are available for all activities.									
	All types of fixed scaffoldings, mobile elevated work platforms									
	•	and competent person available								
	for erection, inspection & opera be certified by 3rd party)	tion (competent person need to								
11	Drinking water, Toilets, Washing facilities, Rest area are available on the site as per the requirements of DS.									
12	Personnel trained in basic firefighting (approved 3rd party, with practical firefighting training) are available on the site.									
13	Adequate personal protective equipment's are available on site and ensured that PPE's are worn by the workers & staff during									
the work. We undertake to carry out the fit-out / modification works in accordance with DS HSE, DM and other relevant International Construction Safety Standards. We are aware that we are liable for financial penalties/warning letters for failing to carry out our works in accordance to the DS HSE regulations & standards. We are also aware that in the event of DS HSE issuing Stop Work Orders or Prohibition Notices, we are bound to stop work immediately till we comply with DS HSE requirements in accordance with DS HSE Regulations & Standards.										
	Main Contractor	Consultant				Tenant / Client				
Name		Name		Name						
Contact		Contact		Contact						
Signat	ure	Signature		Signature						
	STAMP	STAMP				STAMP				
3: FE	E									
	ission Fee Receive	d By: Receipt No.	•			Signature				
		ent submissions. Knowledge fee of AED 10 appl		h transad	ction					
4: Fc	or DS HSE USE									
Receiv	ved by:	Application No.		Date:						
Rema	rks:									
Approved		Approved with comments			Ш	Resubmit				
			Reviewed By							
		Date :								

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