

# FWC Safety Accredited Member (SAM)

## Questionnaire Level two = Employer



Member Name:			
Company Trading Name:			
Name of person dealing with this application:			
Telephone No:		Mobile No:	
Company email Address:			
Work Description – <i>Please enter all categories: ie Industrial; commercial; Roped Access; MEWPS; Ladders ...etc</i>			
1) Employees - how many full or part-time window-cleaning employees using WFP and Ladders do you have?		F	P/T
2) Does your company employ sub-contractors?		YES	NO
<b>Please Note:</b> should your company be successful and achieve SAM accreditation this does not automatically transfer to your sub-contractors			
3) Have all your employees passed the following FWC IOSH training courses? Tick appropriate box below		YES	NO
a) "Cleaning Windows Safely" using portable ladders and water fed poles?			
b) "Risk Assessment" for cleaning windows, guttering and external facades?			
c) Should any employees have higher IOSH Accreditation Please enter details here and include certificate evidence.			
<b>NOTE:</b> If your company has its own health and safety appointed person you may not need to put your employees through the risk assessment course.			
4) Please provide designated person's details and qualifications, including paperwork evidence.			
Name:			
Qualifications:			
b) Please provide certificates of all courses undertaken in your business			
c) Please provide evidence of a tool-box talk /Or other ongoing safety advice to employees			
5) please provide details and records of all employee training			
6) Have you had any enforcement notices issued by the HSE or Local authorities within the last 3 years?		YES	NO
If answer is yes, please submit details of actions:			

7) Have you had any (RIDDOR) reportable accidents / incidents or ill health in the last 3 years?		YES	NO
8) Who is responsible for your health and safety arrangements?			
Contact details:			
Email address:			
Qualifications of responsible health and safety appointed person:			
Please submit all certificates with your application			
9) How do you deliver health and safety arrangements to employees?			
10) Who is responsible for writing and issuing risk assessment and method statements?			
Please provide a sample site specific risk assessment and method statement with your application.			
11) Do you involve your employees in the risk assessment procedure?		YES	NO
12) How does your company communicate risk assessment and method statements to employees?			
13) What are your company policies and procedures for inducting employees to ensure competence?			
14) What has your company got in place for monitoring/auditing and reviewing the effectiveness of Company procedures?			
Please provide evidence of issued personal protective equipment (PPE) and correct care of usage.			
15) What is the company procedure for overseeing that PPR is working and being used properly?			
Please provide the following documentation:			
Health and Safety Policy	Risk Assessments	Method Statement	
Lone Working Policy	Equipment Inspection Log	E/L /PL Insurance details	
PPE Log	Ongoing training records		
Please complete this questionnaire and return with evidence as listed above either electronically or portfolio to: Federation of Window Cleaners; Summerfield house, Harrogate Road, Reddish, Stockport SK5 6HQ. Or, email to: <a href="mailto:beryl@f-w-c.co.uk">beryl@f-w-c.co.uk</a> and attach PDF evidence to your email			
For further information on completing this form contact the FWC on 0161 432 8754			
For information on paperwork evidence required; contact the external verifier on: 01472 878750			
The Level two <u>accreditation charge</u> is £225.00 plus a one-off joining fee of £25.00 = <b>£300.00 inc. vat</b>			
Signature of applicant		Date:	