Annex 2 to

Occupational Health & Safety Procedure for Contractors BDS-40

Approved with 29 August 2019, No. TV1(1.2-1)-403

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| (Form of Statement) | | | | |
| **STATEMENT OF PREPAREDNESS BY CONTRACTOR TO START CONTRACTUAL WORKS**  **AT PUBLIC COMPANY ORLEN LIETUVA** | | | | |
| **1. Contracting company** | | | | |
| **2. Contract No. \_\_\_\_\_\_\_\_\_\_ / Type of works \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
| **3. For work execution period from \_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_**  **(date) (date)** | | | | |
| **4. Planned duration of works in days \_\_\_\_\_\_\_\_\_\_** | | | | |
| **5. Description of works** | | | | |
| **Documents required for the works have been submitted;**  **permission to start the works given by:** | | | | |
| **Responsible employee** | Full name or personal stamp | Signature | Date | Comments |
| **Public Company ORLEN Lietuva Control and Prevention**  **Group Manager** |  |  |  |  |
| **Public Company ORLEN Lietuva Environmental Control Manager** |  |  |  |  |
| **Public Company ORLEN Lietuva Work Coordinator** |  |  |  |  |
| 1. Items 1 to 5 hereof shall be completed by the Contractor.  2. Please indicate contract reference number if this Statement is for execution of works under some specific contract, or indicate the type of works (e.g., erection of scaffolding, cleaning of equipment, demolition works, earth works, etc.) if the Statement is being prepared for the period of one year.  3. All required approvals (signatures) shall be collected by the Contractor.  4. In case the required approvals are absent, the Contractor shall not commence any work.  5. Once completed, the original of this Statement shall be registered with and submitted for keeping at Occupational and Process Safety Control Department.  6. For execution of specific daily works (hot works, maintenance, unsealing works, etc.), the Contractor shall obtain separate permits for works issued in accordance with the procedures effective at the Company. | | | | |