

Rating Form (Appendix B)

Contractor Name:		Tender / Bid #:		
Date of Rating:	Rating Valid Until:	Rated by:		
Element/Section	Description	Yes	No	
2. Safety Record	WSIB Clearance Certificate or Proof of Independent Operator Status (MUST be provided in order to continue with scoring)	<input type="checkbox"/>	<input type="checkbox"/>	
	WSIB Workplace Injury Summary Report	<input type="checkbox"/>	<input type="checkbox"/>	
	WSIB NEER / CAD-7 / MAP Summary Statement	<input type="checkbox"/>	<input type="checkbox"/>	
2. MOL Reports (last 3 years)	History of fatalities or critical injuries (type, number, frequency)	<input type="checkbox"/>	<input type="checkbox"/>	
	History of MOL safety-related orders, prosecutions, charges or fines (type, number, frequency)	<input type="checkbox"/>	<input type="checkbox"/>	
	History of TSSA fines or suspensions	<input type="checkbox"/>	<input type="checkbox"/>	
	History of utility fines or suspensions	<input type="checkbox"/>	<input type="checkbox"/>	
2. Evaluation	Work History with the Town (if available)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Accreditation	Proof of Accredited Safety Management System in place Skip to Section six if there is an approved current SMS in place.	<input type="checkbox"/>	<input type="checkbox"/>	
4. Safety Policy	Current Health & Safety Policy (Provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
5 A. Safety Program	Procedures manual (Provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
	Includes review of subcontractors' safety record	<input type="checkbox"/>	<input type="checkbox"/>	
	Discipline Policy - types of safety infractions and penalties (Provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
	"Yes" to having trained health and safety rep or joint committee	<input type="checkbox"/>	<input type="checkbox"/>	
5 B. Training	Worker and Supervisor Awareness training (Proof provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
	"Supervisory Competency Training on 3 year cycle (Proof provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
	Sample JSA's or equivalent and sign off sheet with signatures (Proof provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
	Sample Toolbox talks or equivalent and sign off sheet with signatures (Proof provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
	Most recent mandatory safety training - description & sign off (Proof provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	
6. Pandemic Mitigation	Pandemic (COVID-19) Mitigation Plan (Proof provided and adequate)	<input type="checkbox"/>	<input type="checkbox"/>	

Is the documentation submitted **acceptable** to The Corporation?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Signature

Date

I have reviewed the material submitted with the Bidder's Safety Checklist (Appendix A).