



HOLLAND BOARD OF PUBLIC WORKS - CONTRACTOR SAFETY MANAGEMENT PROGRAM

CONTRACTOR ACKNOWLEDGEMENT FORM

We have read and understand the Holland Board of Public Works Contractor Safety Management Program Rules presented to us on (date) ____/____/____ and will follow these rules while performing work for the Holland Board of Public Works.

We understand that failure to comply with these rules or supply the requested documentation (Contractor Acknowledgement Form, Contractor Site Specific Safety Orientation Training Form, equipment certifications, etc.) may result in enforcement action as outlined in these rules.

Name of Contractor Company

24-hour Emergency Phone Number

Name of Contractor Safety Representative

Signature of Contractor Safety Representative

Name of HBPW Representative

Signature of HBPW Representative