



12 November 2010

ARG Attn: The Manager GPO Box 5223 BRISBANE QLD 4001

Dear Sir / Madam

## RE CONTRACTOR ACCREDITATION FINALISED

Thank you for your recent application for Contractor Site Accreditation with Xstrata North Queensland.

We are pleased to advise that you have been successful in satisfying our selection criteria for accreditation at Xstrata NQ, Mount Isa Mines Limited ("MIM") and Ernest Henry Mining Pty Ltd ("EHM") as selected on your application.

Your Contractor Accreditation Number for both Mines is 2008NO1672.

Please find enclosed a copy of your Xstrata NQ Accreditation Certificate and executed Accreditation Agreement for your records.

Please register at <u>www.tenderlink.com/xstrata</u> to become a registered tender so that you may view posted tenders by Mount Isa Mines.

Thank you and Regards,

Stephanie Dawson
Contracts Officer

Xstrata Copper Contracts Department

07 4744 3433 07 4744 3993

Fax: Email:

Ph:

49-Sch4



Mount Isa Mines

Private Mail Bag 6 Mount Isa Queensland Australia 4825

Tel +61 7 4744 2011 Fax +61 / 4/44 3/3/ www.xstrata.com







# Accreditation Status

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Sharkey, Merv (Townsville - Copper)				
From: Sent: To: Cc: Subject: Attachments:	Garry Jakovich 49-Sch4 Thursday, 24 March 2011 2:57 PM Sharkey, Merv (Townsville - Copper); Douglas Gorman Cain, Matthew (Mount Isa - Copper); Healy, Margot (Mount Isa - Copper); Kuzmanovic, Adam (Mount Isa - Copper) RE:			
	ees for a safety committee within the CRT Isa business.			
regards	h			
Garry Jakovich				
From	49-Sch4			
Sent: Thursday, 24 March To: Garry Jakovich; Dougla				
Cc:	49-Sch4			
<b>Subject:</b> s78B(2) Privacy				
Garry As discussed, Matt/ Magot	or Adam will call Doug to arrange a time to talk with B(2) Privacy			
Noted that the CRT report some data to be provided.	will not be finalised next week, most likely the following week, as you are waiting for			
Regards merv				
****	***********			
The information containe	ed in this e-mail is confidential and is			
intended only for the use	of the addressee(s).			
If you receive this e-mail	in error, any use, distribution or			
copying of this e-mail is a	not permitted. You are requested to			
forward unwanted e-mail	and address any problems to the			
Xstrata Queensland Supp	ort Centre.			
Support Centre e-mail: su	pportcentre@xstrata.com.au			
Support Centre phone: A	ustralia 1800 500 646			
International +61 2 9034	3710			
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www.	T
Where: CRT W/SHOP 102 BARKLY HIGHW.	AY ISA
When: 24/02/2011	
Present:	AS PER ATTENDANCE RECORD
Apologies:	
Meeting Time: 4.00PM	
Discussion of notes from the prev	ious meeting
Discussed as per below. NA	
Discussion of note from meeting	Action
Zero harm video training safety into Safety interaction:	
Gary spoke on this in general, posite complacent, fatigue, speed, accident with staff should happen on a regul	ts occur. Safety interaction
Safety committee: Nominees as follows, Justin Martin Doug Maddick, Ian Hoskins, Robe McCormack	
Uniforms: Workshop uniforms to be laundered excess grease, lead etc	Justin Martin d by drycleaners because of
General discussion by all on how the	nings are being achieved
	The control state and the control of



## TOOL BOX MEETING ATTENDANCE RECORD

Location: Mount Isa

Date: 24/02/2011 Safety Interaction Training

Time: 16:00

Print Name	Signature
GHRis ORGILLY	
MOSEPH CANIZARES	<i>C</i> 1
DARREN WRIGHT	
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Alex Emes.	
LEMMY, MARSHALL	
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NIENGUE JOYANIA	
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Paul Wilson	
CHRIS TROTT	
Justin MARYIN	
HOWA M'COIMACK	H
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## 5. HEALTH CHECKS

#### 5.1 PURPOSE

To specify the intervals at which CRT employees and subcontractors are required to have health checks. It is a legislative requirement to have regular health checks.

It is important that employees and sub-contractors comply to the requirements to have regular checks on their health so that they can undertake their employment without risk to themselves or others. CRT Group wants to ensure a fulfilling work and home life. If any problems are discovered, both the employee or subcontractor and CRT Group can take corrective action.

#### 5.2 WHEN WILL IT OCCUR?

#### Administration & Cierical Staff

Administration and clerical staff are required to undergo a pre-employment medical,

#### Interstate Drivers

Interstate Drivers are required to have prescribed medicals every twelve (12) months in accord with the criteria for assessment as set out in NRTC documents, "Medical Examinations of Commercial Drivers" and "Faligue Management Scheme".

#### **Operators and Sub-contractors**

Operators and subcontractors are required to have the prescribed medical examination on a regular basis as set out in NRTC documents, "Medical Examination of Commercial Drivers", and the requirements of "Fatigue Management Scheme". Up to the age of 49 years, employees and subcontractors are required to be examined once every three (3) years. Operators and subcontractors 49 years or older are required to be examined every twelve (12) months.

#### Employees Exposed to Particular Hazards

- 1. Employees identified as having exposure to the following will require health monitoring:
  - Hazardous substances listed in Schedule 3 of the National Model Regulations for the Control of Workplace Hazardous Substances, [NOHSC:1005(1994)] and the exposure to the hazardous substance is such that it is likely that an adverse effect on the employee's health may occur under the particular conditions of work.
  - Noise levels above the regulatory threshold
  - Atmospheric contaminants
  - Biological pathogens
  - Biological pathogens as listed in the Health (Infectious Disease) Regulations 1990 (food handlers only).
- 2. When exposure to Hazard is identified, monitoring will be carried out by external specialists and details of the appropriate health monitoring methods applicable to the site that will be undertaken will be documented. An explanation of how each test will be undertaken, from the initial explanation to employees to the follow up stage shall be documented and communicated to relevant employees. Examples include hearing tests and biological monitoring (blood and urine samples to test lead levels
- The Health & Safety Committee will monitor all aspects of the program yearly to ensure
  its effectiveness. The health-monitoring program is the responsibility of the site
  manager and records will be kept by the site to meet state legislative requirements.

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HEALTH CHECKS

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Forms to be used for Commercial Drivers:
Medical Health Assessment (Form A1)
Medical Examination Summary Report (Form A2)
Declaration by Employee Form (Form B)
Report by Medical Practitioner (Form Part C)
Medical Screening Feedback (Form Part D)

#### 1. Instructions to Employees and Subcontractors

This programme of medical checks is conducted nationally by CRT Group. It is a legislative requirement to have regular health checks.

CRT Group wishes to ensure that everybody is aware of their health needs to ensure a fulfilling life both at work and home. If any health problems are found during the medical, both the employee or subcontractor and CRT Group can take corrective action.

This is not a pass or fail test, its intention is to help you monitor your health overtime to achieve sound health and fitness standards.

You must take all parts of this form with you to your appointment.

Please sign the declaration that gives permission for the examining Doctor to convey the results of the medical examination to the employer and any appropriate authority. The Doctor will witness your signature.

Please Note: All results and tests are placed in a sealed envelope and placed with your personnel file. This file is locked and if anyone requires to look into your medical file they can only do so with your presence and written approval. Some Authorities have power under law to preview medicals but still have to submit the required documents for this to proceed.

This is strictly confidential and CRT Group will protect this in every possible way.

#### 2. Instructions to Doctor

These medical checks are designed to monitor the level of fitness and health of our employees and subcontractors. Please review Part A of this form, ensuring all questions have been enswered. Please then conduct the physical examination, Part B, Part C

(1) Declaration of Employee Form to be witnessed by examining Doctor.

(2) Report by Medical Practitioner. Part D; Medical screening feedback.

We request that you discuss your conclusions with employee/subcontractor and counsel them on health and fitness strategies and hand them Part D of this form.

Return Parts A, B and C of this form with your account attached to the State Branch Manager for processing.

Thank you for providing this service.

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HEALIH CHECKS

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SAFETY MANUAL Procedure No. 20 Issue 3: Amd 2: January, 2008 Approved by: QAM

## 20. THE SAFETY/ENVIRONMENTAL IMPROVEMENT REPORT

#### 20.1 PURPOSE

To define the method by which CRT raises, communicates, actions and tracks problems through to completion. The problems can come from within CRT or from a client or customer. The procedure is intended to document the short and long term actions taken to rectify problems and to prevent their recurrence.

Safety and Environmental problems are to be raised in the same system as quality problems as both are considered serious by CRT and that the methods used to address them will be similar. Either type of problem can affect our ability to service our customers.

## 20.2 WHY IS IT REQUIRED?

To make sure that any problems raised are addressed, actioned and that the action is effective. Failure to do this will result in problems not being fixed, which can lead to our employees working in potentially dangerous situations as well as hindering our ability to service our customers.

#### 20.3 WHEN WILL IT BE USED?

The procedure will be used whenever problems occur at CRT which need action to fix them, and also when a problem is raised by a customer the Safety/Environmental Improvement Report will be used.

#### 20.4 WHERE WILL IT OCCUR?

On all CRT sites and at client or customer sites where problems occur.

#### 20.5 RESPONSIBILITIES

All CRT personnel and the client or customer.

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THE BAFETY IMPROVEMENT REPORT

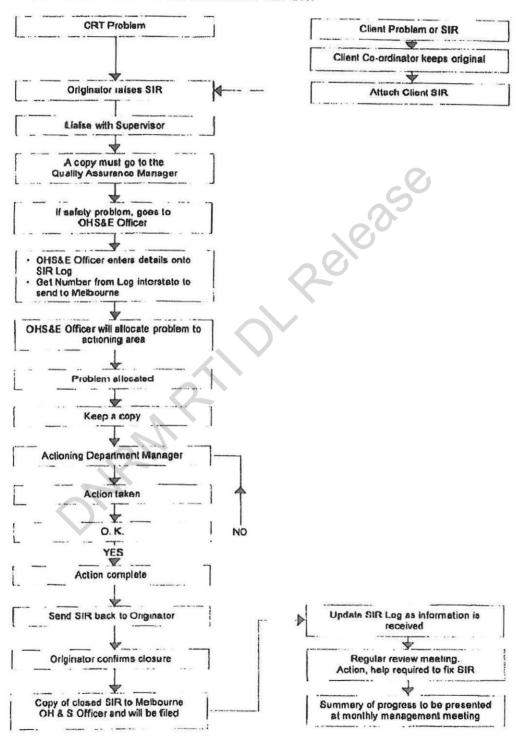
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#### 20.6 METHOD

#### FLOW CHART—SAFETY IMPROVEMENT REPORT



THE SAFETY IMPROVEMENT REPORT

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#### 20.7 KEY POINTS

- Any person can raise a Safety/Environmental Improvement Report (CRT QA F08).
- The area supervisor or manager should keep copies of the Improvement Report for reference.
- The Quality Assurance Manager will receive all Improvement Report's for review and allocate to the person responsible for corrective action.
- A copy of the Improvement Report must be sent to the Quality Assurance Manager In Melbourne. This will allow the numbering of the Improvement Report and the tracking of its progress through the use of the SIR Log. (Log kept in Melbourne Office)
- If the problem is a safety, food safety or environmental issue the problem will be allocated to
  the OHS&E Officer or officer responsible in each branch for action to be addressed. If the
  OHS&E Officer raises a problem there is no need for the problem to be routed through the
  Quality Assurance Manager.
- The OHS&E Officer will enter the details of the problem on the Safety Improvement Log, where
  the problem will be given an identifying number. This will be used to track the progress of the
  problem
- If necessary the OH&S Officer will allocate the problem to the area responsible for the corrective action.
- The Area Supervisor or manager will assist any area personnel to raise An Improvement Report. Importantly, the question of whether a SIR is required needs to be addressed. If a problem can be easily fixed by the people within an area, an Improvement Report should not be raised.
- After the corrective action has been taken the SIR is to be sent back to the originator, for the
  originator to confirm closure.
- A copy of the completed Improvement Report must be sent to the OHS&E Officer in Melbourne.
- A regular meeting will be held to review the progress of the problems. The key site personnel
  will attend with the meeting being chaired by the OHS&E Officer.
- The completed copy will be filed by client or area affected.
- A summary of the Safety/Environmental Improvement Report status will be presented at the monthly Management Meeting.
- Outstanding Improvement Reports will be followed up via State Managers through the GMT.

## 20.8 FORMS TO BE USED

Quality / Safety /Food Safety / Environmental Improvement Report [QIR/SIR]	Refer to CRT QA F08 in back of manual.
Quality Improvement / Safety Improvement Report Log	Refer to CRT QA F09 in back of manual.



## 21. RISK ASSESSMENT

## 21.1 PURPOSE

To describe the method by which CRT assesses the risks involved with the materials and the work site and sets in place the appropriate action commensurate with the risk.

It is of the utmost importance that all risks are identified and action is taken to prevent any accidents and injury to personnel.

CRT group is committed to the principle of zero harm of employees, visitors and contractors at our workplaces. In all instances CRT group will endeavour to ensure that persons within the workplace who may be at risk are included in the risk management process.

Meet all regulatory requirements on a national basis and comply with standard AS/ NZS 4360, ensuring alignment organisationally to CRT's Safety Policy, Environmental Management Policy, Risk Management Policy and to QR's, Risk Management Policies.

#### 21.2 WHEN WILL IT OCCUR

Whenever a new product or service is to be introduced into the workplace, when new equipment is to be used, when hazards/ risks are identified within the workplace and to support the SIR investigation process.

#### 21.3 METHOD

- Once a potential risk has been identified a Risk Assessment should be performed immediately, this assessment process should involve at least 2 people one of which should include the person who reported, identified or is potentially exposed to the hazard or risk in question.
- The hazard assessment team will be assessing hazards and risks by looking at and using the following scale:



## LIKELIHOOD / PROBABILITY

Score	Likelihood	Expected Frequency*
6	Very High likelihood of the risk happening in related operating environment     Would be surprising if it did not happen	> 10 times per year
5	<ul> <li>High likelihood of the risk happening in related operating environment</li> <li>Has occurred recently</li> </ul>	> Once per year
4	<ul> <li>Probably could occur in related operating environment</li> <li>Likelihood of occurrence is increased due to limit of treatment</li> <li>History of occurrence with the defined consequence level within QR</li> </ul>	Between once every 1 to once every 10 years
3	<ul> <li>Has occurred sometime in related operating environment with the defined consequence</li> <li>Occurrences have been experienced.</li> <li>Would not be surprising if it occurred.</li> </ul>	Between once every 11 to once every 50 years
2	<ul> <li>Could occur with the stated consequence in related operating environment but it is considered unlikely.</li> <li>Causal events have occurred but offects have been treated so that the defined consequence has not resulted.</li> <li>No history of a loss situation which results in the possible consequence level defined in related operating environment.</li> </ul>	Between once every 51 to once every 100 years
1	<ul> <li>Possible, but very unlikely, that the risk will occur in related operating environment and result in the defined consequence.</li> <li>Likelihood of the consequence occurring is extremely remote.</li> </ul>	> once every 100 years

## CONSEQUENCE

Score	Safety			
6	Multiple deaths (> than 5) and multiple serious injuries.			
5	Multiple deaths (5 or less)			
4	Single death or multiple serious injuries			
3	erious injury (hospitalisation)			
2	Medical Treatment (Doctor or Medical facility)			
1	Illness or injury treatment or no treatment (First aid only)			

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#### RISK RANKING MATRIX

		Consequence					
		1	2	3	4	5	6
	6	7	8	9	10		
9	5	6	7	8	9	10	
Likelihood	4	5	6	7	8	9	10
Like	3	4	5	6	7	8	9
	2	3	4	5	6	7	8
Γ	1	2	3	4	5	6	7

Key: 11-12 = Extreme risk 8-10 = High risk 4-7 = Moderate risk 2-3 = Low risk

3. The Assessment team will evaluate the risk using their knowledge and experience in relation to the situation. The questions that should be asked are: what could go wrong, how serious could it be, and how many people would be exposed to the risk and what are the potential threats or impacts on plant, equipment or the environment?

Once the Risk Assessment has been performed it will be used as the indicator for the urgency of taking remedial action.

- 4. The assessment team will determine the risk factor and initiate the necessary action by coordinating with the relevant personnel. If the risk is severe enough the area will be quarantined and action will be taken according to the written procedures.
- 5. Immediate temporary controls will be implemented to reduce the degree of risk as soon as the hazard is identified. This will reduce the chance of injury and allow time for permanent solutions to be implemented. These controls will be reviewed and approved by the OHS&E Officer responsible for the branch, in consultation with the assessment team.

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#### 21.5 TRAINING

CRT Group will ensure that internal and external training reasonably required to assist in organisational compliance is maintained for the purpose of this procedure in line with the requirements of our safety and environmental management system.

#### 21.6 FORMS TO BE USED

Quality / Safety / Food Sefety / Environmental Improvement Report [QIR/SIR]	CRT QA F08
Job Safety and Environmental Analysis Form	CRT QA SM F11
Manual Handling Risk Assessment	CRT QA SM F10
Plant Item Checklist	CRT QA SM F12
Site Inspection Checklist	CRT QA SM F08
QA OH&SE FS Meeting Record.	CRT QA SM F13



- To provide such information, instruction, training and supervision to all employees as are necessary to enable the employees to perform their work in a manner that is safe and without risks to health.
- Making decisions on a person's capacity to work safety.
- Advising Management of concerns about an employee's ability to work safely due to suspected drug or alcohol abuse or due to the ordinary use of prescription or over the counter drugs.
- Ensuring that employees and contractors read the induction book and understand this
  and other policies and duly sign to attest to understanding of procedures.

## 28.5 EMPLOYEE'S RESPONSIBILITES

- To abide by the requirements of the CRT Safety Policy by not partaking of drugs or alcohol in the workplace. To ensure that they do not endanger their own health and safety or the health and safety of any other person who may be affected by the employee's acts or omissions at the workplace, by the intake of drugs or alcohol.
- All employees, contractors, hauliers and consultants are required to have a 0.00% blood alcohol level and a 0.00% blood level of all non prescribed drugs at all times at work.
- To ensure that at all times during working hours on company premises and inclusive
  of operating company equipment that they do not possess, distribute or sell illegal
  drugs and alcoholic beverages.
- Any employee, contractor, haulier or consultant who is on a course of prescribed medication or taking over the counter drugs, must notify their Manager if their work performance is likely to be affected or if there may be a risk to themselves, other staff, contractors or the public. Confidentiality will be observed in these matters. The employee may be assigned to alternative duties whilst taking such medication if this is considered appropriate action by the Company.
- Any employee who has a reasonable belief that another employee is affected by drugs or alcohol to the extent that they are unable to work in a safe manner, must notify his/her Manager IMMEDIATELY of this situation.

SAFETY MANUAL Procedure No. 21 Issue4: Amd 5: January, 2009 Approved by; NQAM



- 6. The permanent hezard control should be implemented. This control should be such that the risk has been reduced to such an extent that no problems should occur in the future, and should follow the principles of "hierarchy of control" based on regulatory control mechanisms. The areas to examine are:
  - a) Eliminate the hazard at its source whenever practical.
  - Introduce engineering control such as guards and switching devices to control the hazard if it cannot be removed.
  - Introduce administrative control such as procedure modification, job rotation and training.
  - d] Continual follow up to ensure that the measures are still in place and to keep the hazard's potential in people's minds.
- 7. The corrective action will be presented by the assessment team to the local designated workplace within a toolbox forum, (if the matter is urgent, the safety treatment can be undertaken by the assessment group in consultation with the area supervisor and local OHS&E officer and designated workgroup OH&S representative), confirmed as complete by the assessment team and OHS&E Officer. The hazard will not be signed off until all corrective action has been implemented. The hazard can be downgraded during this process.
- If an accident has occurred as a result of the hazard an Accident Report and an Improvement Report (CRT QA F08) will be filled out detailing the problem and the corrective action to be taken.
- If the hazard is a Catastrophic or Mejor rating the problem and corrective action must be detailed on An Improvement Report and logged into the system so that action can be monitored.
- 10. The completed JSEA's undertaken at the branch are to be raised from the toolbox meeting formal to the local OHS committee group as a process management and review mechanism. This group are to review and assist the assessment toam if required to manage the issue.
- 11 Following the undertaking of the assessment through to the risk treatments and reporting, the assessment team are required to review the management process applied for signoff. The review should determine that the hazard and risk treatments are sufficient and have not created a subsidiary hazard or risk as a consequence.
- The JSEA should be raised on the local register and closeout out following review
  of the incident based on the spreadsheet completion process.

#### 21.4 RESPONSIBILITIES

Terminal Supervisor
Branch Managers
Contractors
Warehouse Supervisors
OHS Managers
OHS Representatives
Client Representative
Emergency Services
CRT Group employees



## 21.5 TRAINING

CRT Group will ensure that internal and external training reasonably required to assist in organisational compliance is maintained for the purpose of this procedure in line with the requirements of our safety and environmental management system.

## 21.6 FORMS TO BE USED

Quality / Safety / Food Safety / Environmental Improvement Report [QIR/SIR]	CRT QA F08
Job Safety and Environmental Analysis Form	CRT QA SM F11
Manual Handling Risk Assessment	CRT QA SM F10
Plant Item Checklist	CRT QA SM F12
Site Inspection Checklist	CRT QA SM F08
QA OH&SE FS Meeting Record.	CRT QA SM F13

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## 28. DRUG & ALCOHOL POLICY

#### 28.1 SCOPE

This policy covers all CRT Group premises, clients and customer work sites throughout Australia. The policy covers all employees, contractors, hauliers and consultants and any third party that interfaces with or performs work for the CRT Group.

This policy will apply at all times.

### 28.2 POLICY OBJECTIVES

- The overriding objective of this Policy is to protect the safety of employees, contractors, consultants, clients, customers and the public.
- 2. Maintain a safe and healthy work environment.
- Reduce the cost of drug and alcohol abuse to the company, the individual and the community.
- Encourage employees with drug or alcohol abuse problems to address the issues themselves (and provide them with access to information and assistance of issues of use and abuse).
- 5. Ensure the company and employees meet their legal requirements.
- Emphasise that inappropriate use of substances by an employee is not acceptable in the workplace and may lead to termination of employment.

## 28.3 CRT GROUP RESPONSIBILITIES

CRT Group is responsible for:

- Ensuring the Policy and its Procedures are implemented and adhered to by communicating them at induction and on an ongoing basis through training and education.
- Ensuring that CRT Employees are fully conversant with, adhere to and implement the Policy.
- Where appropriate support counselling or treatment.

#### 28.4 RESPONSIBILITIES OF MANAGERS / SUPERVISORS

- Managers and Supervisors have a responsibility to implement this Policy and Procedure in order to maintain a safe and healthy work environment for all employees, contractors and consultants.
- To maintain as far as is practicable any workplace under the control and management
  of the employer in a condition that is safe and without risks to health.

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DRUG & ALCOHOL POLICY Revision: June 2007

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- To provide such information, instruction, training and supervision to all employees as are necessary to enable the employees to perform their work in a manner that is safe and without risks to health.
- Making decisions on a person's capacity to work safely.
- Advising Management of concerns about an employee's ability to work safely due to suspected drug or alcohol abuse or due to the ordinary use of prescription or over the counter drugs.
- Ensuring that employees and contractors read the induction book and understand this
  and other policies and duly sign to attest to understanding of procedures.

#### 28.5 EMPLOYEE'S RESPONSIBILITES

- To abide by the requirements of the CRT Safety Policy by not partaking of drugs or alcohol in the workplace. To ensure that they do not endanger their own health and safety or the health and safety of any other person who may be affected by the employee's acts or omissions at the workplace, by the intake of drugs or alcohol.
- All employees, contractors, hauliers and consultants are required to have a 0.00% blood alcohol level and a 0.00% blood level of all non prescribed drugs at all times at work.
- To ensure that at all times during working hours on company premises and inclusive
  of operating company equipment that they do not possess, distribute or sell illegal
  drugs and alcoholic beverages.
- Any employee, contractor, haulier or consultant who is on a course of prescribed medication or taking over the counter drugs, must notify their Manager if their work performance is likely to be affected or if there may be a risk to themselves, other staff, contractors or the public. Confidentiality will be observed in these matters. The employee may be assigned to alternative duties whilst taking such medication if this is considered appropriate action by the Company.
- Any employee who has a reasonable belief that another employee is affected by drugs or alcohol to the extent that they are unable to work in a safe manner, must notify his/her Manager IMMEDIATELY of this situation.



#### 28.6 SPECIAL EVENTS

Certain social events (e.g. Christmas functions and marketing activities involving client entertainment) may justify consumption of alcohol on company premises. This may only occur with prior written permission from a member of the Group Management Team or State Branch Managers. Social Event / Function Request form (CRT QA SM F01) and Drug & Alcohol Acknowledgment form (CRT QA SM F02) are to be completed and signed (held by Company).

#### 28.7 PROCEDURE

Disciplinary action relating to OHS&E issues applies to all employees, contractors, hauliers and consultants. Substance abuse in the workplace is principally an Occupational Health and Safety issue. CRT Group maintains the right to dismiss an employee, contractor, haulier or consultant without notice for a serious and wilful breach of OHS&E rules and policies. No person shall wilfully, recklessly or intentionally interfere with, remove, misuse or damage anything that is provided in the interest of health, safety and welfare, nor place at risk, the health and safety of any person in their workplace.

The decision on a person's ability to work safely will be made by their immediate Manager, with assistance of the QA/OHS&E and HR Departments.

If it is suspected that an employee is incapable of working in a safe manner, the Manager, with assistance as detailed above will investigate and record the incident. The employee may be required to undergo testing for suspected substance abuse in accordance with the testing procedure outlined in clauses 28.7.1 and 28.7.2

- All testing shall be performed at CRT Group's designated Medical Providers. These
  premises will provide the highest quality of testing to assure the accuracy of the
  results
- If the test is positive ('A' test) a 'B' test on the sample will be taken to check he result
  at an independent Pathology Laboratory.
- The employee may be asked to undertake a counselling/education program, be offered other duties or be requested to leave the premises.

#### 28.7.1 TESTING FOR DRUGS & ALCOHOL

In an effort to achieve the aims of this policy, CRT Group will conduct testing for drugs and alcohol.

A programme of testing for alcohol and other drugs will form part of the overall programme for the management of alcohol and other drugs in the workplace.

It is comprised of the following.

- Pre-Employment
- Annual Medicals
- Accident and Incident Investigation
- Random Drug and Alcohol Testing
- For Cause and upon Suspicion

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All testing will be conducted by CRI Group approved Medical Professionals at their location, and results will be held in strict confidence.

DRUG & ALCOHOL POLICY

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CRT Group may conduct random breath testing from time to time. A refusal to submit to a random breath test may be treated as serious misconduct.

CRT Group may compel individual employees contractors, hauliers or consultants to participate in drug and alcohol testing where it is reasonable to suspect drugs or alcohol affects the individual. This will occur where there are discernible signs of:

- 1). Intake of drugs and alcohol
- 2). Physical or mental impairment of function.

#### 28.7.2 TESTING PROCEDURE

As part of the CRT Group commitment to monitoring the health and safety of its employees, medical examinations will be conducted by a CRT Group nominated Medical Provider and will include DRUG & ALCOHOL tests. These will be conducted by qualified practitioners and will form a part of the programmed medical examination. The employee will be informed of test results and confidentiality is assured.

#### 28.7.3 **SEARCHES**

Searches will be conducted by members of the Police Force if it is reasonably suspected or information is received that indicates drugs / or alcohol is being stored, consumed or sold on CRT Group property. (Property includes land, buildings, vehicles or plant equipment where so-ever located on property owned or operated by CRT Group).

#### 28.7.4 DISCIPLINARY ACTION

Testing positive to illegal and unprescribed drugs

If an employee tests positive to illegal or unprescribed drugs, immediate action up to and including instant dismissal will occur. If a contractor, hauller or consultant tests positive to illegal or unprescribed drugs immediate termination of services will occur.

Refusal to leave worksite.

If an employee, contractor, haulier or consultant refuses to leave the workplace despite being requested to do so, the employee, contractor, haulier or consultant will be subject to disciplinary action for misconduct and neglect of duty. This will apply if it is considered that the employee, contractor, haulier or consultant has deliberately attempted to work whilst being incapable of performing their normal duties in a safe and officient menner. If unruly and aggressive behaviour occurs, Police will then be summoned. This is a ground for instant dismissal.

Being unable to work in a safe manner owing to the use of drugs or alcohol is strictly prohibited. It is a ground for dismissal where positive drug tests confirm illegal or unprescribed drugs

It is reiterated that a breach of this policy, as outlined above, constitutes grounds for instant dismissal.

Except in exceptional circumstances, disciplinary action or Dismissal cannot be avoided by a request for rehabilitation, after an employee has been approached to under go testing.

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DRUG & ALCOHOL POLICY Revision: June 2007 Page 4 of 7



#### 28.8 REHABILITATION

Those employees who voluntarily admit to a drug or alcohol problem will be offered a rehabilitation program under Medical Supervision at CRT Group's designated Medical Provider at a reasonable cost. This will be determined on an individual basis. An employee having problems with alcohol and/or other drugs:-

- Must undertake and continue with recommended treatment in accordance with agreed Rehabilitation Program.
- Will be entitled to sick leave or leave without pay (if no sick leave entitlement remains)
  whilst attending treatment.

Each case will be investigated and assessed and confidentiality will be assured. If entitled to sick leave or any special leave the rate of pay for such leave will be the same as the rate of pay applicable for sick leave.

Rehabilitation and any after care programs will be tailored to the needs of the Individual. They will be formulated by a CRT Group approved Medical Adviser in consultation with a drug and alcohol dependency consultant.

The duration of the after care program will be 12 months. Random drug and alcohol testing may be conducted on an individual during after care and for a further two (2) years.

DISCIPLINARY action may be taken against an employee in the following circumstances:

- Refusal to participate in rehabilitation or after care program.
- Failure to respond to treatment or unsatisfactory work performance.

#### 28.9 POLICY REVIEW

This policy will be monitored by the relevant Health & Safety Committee's and may be amended if and when required.

Input is welcomed from all employees in relation to how the policy is working and concerning any suggested improvements.

All feedback and suggestions provided will be taken into account. This is not a guarantee that they will be implemented.

#### 28.10 FORMS TO BE USED

Social Event / Function Request	CRT QA SM F01
Drug & Alcohol Acknowledgment	CRT QA SM F02

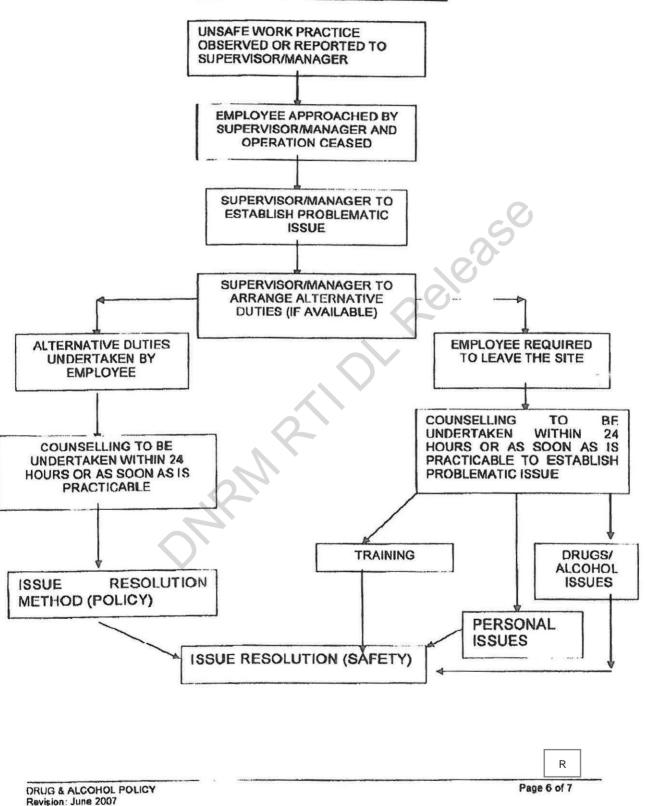
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#### ATTACHMENT 1.

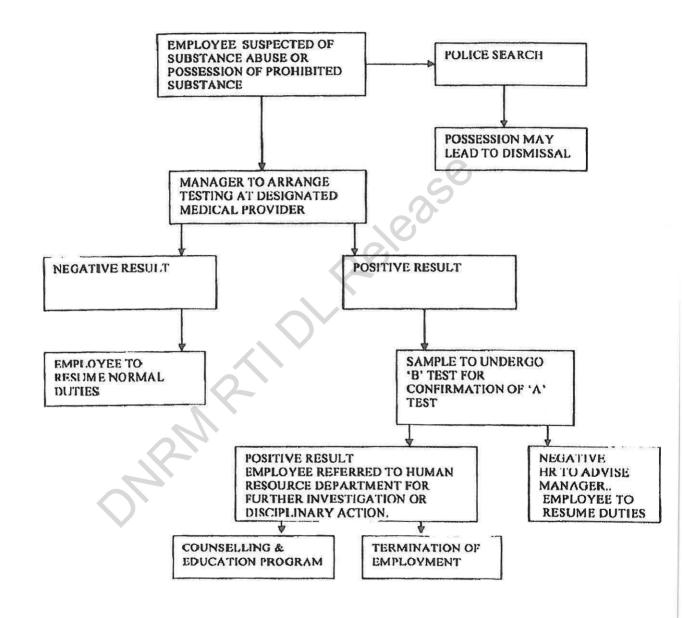
## **UNSAFE CIRCUMSTANCE MODEL**





### ATTACHMENT 2

## PROCEDURE FOR SUSPECTED POSSESSION OR SUSPECTED SUBSTANCE ABUSE



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DRUG & ALCOHOL POLICY Revision: June 2007 Page 7 of /



## 29. SAFETY MEETINGS - DESIGNATED WORKPLACE GROUPS

#### 29.1 PURPOSE

The purpose of this procedure is to enable input from the workplaces in regards to any matters concerning health and safety of the employees.

#### 29.2 SAFETY TOOLBOX MEETINGS

These meetings are to be held monthly in all designated work groups prior to the Occupational Health & Safety and Environment (OH&S) Committee Meetings to enable OHS&E Representatives to communicate employee concerns to the OHS&E Committee. (See OHS&E Committee Policy) and the QA/OHS&E Department. These meetings also provide a forum for management to pass on information regarding company initiatives relating to OHS&E issues.

The Safety & Environment Toolbox meeting will also be the forum for the election of OH&S Representatives in line with the requirements of the various State OH&S Acts. Election of Representatives will be entered on the Toolbox Meeting Record, CRT QA SM F03

The Toolbox Meeting Record, CRT QA SM F03 is a reporting medium to the OHS&E Committee and the QA/OHS&E Department.

Toolbox Attendance must be completed and attached to the Toolbox Meeting Record. All documents must be forwarded to the respective OHS&E personnel in their State.

## 29.3 FORMS TO BE USED

Toolbox Meeting Record	CRT QA SM F03
Toolbox Attendance Record	CRT QA SM F09



SAFETY MANUAL Procedure No. 31 Issue 4: Amd 0: April 2009 Approved by: National QA/OHS&E Manager



## 31. FATIGUE MANAGEMENT

## 31.1 INTRODUCTION

CRT Group is committed to the principles of Occupational Health and Safety legislation and the provision of a safe workplace as far as is practicable. The Occupational Health and Safety legislation in all states describes the employer and employee responsibilities with respect to safe systems of work.

NTC Australia Guidelines for Managing Heavy Vehicle Driver Fatigue and Code Of Practice, Fatigue Management for Commercial Drivers provides guidance to CRT in relation to standards of work, rest and the framework for developing Fatigue Management systems.

CRT Group recognises that an effective Faligue Management System involves management practices and office procedures including;

- Maintaining an open line of communication between management and drivers;
- Encouraging feedback from drivers;
- Ensuring that the Faligue Management System is included in driver induction programs and in Human Resources procedures and practices, and;
- Appropriate documentation and record keeping practices.
- Training and information for all parties involved in the management of heavy vehicles.
- System reviews and audits

This procedure has been developed with due consideration to regulatory requirements including Heavy Vehicle Driver Fatigue Reform and CRT Groups' Quality Assurance Manuals and procedure documentation.

This procedure applies to commercial vehicle Drivers, Supervisors and Managers, subcontractors and anyone else in a contractual relationship with CRT Group involved in commercial driving requirements and warehouse storage plant operation.

#### 31.2 ASSESSMENT

The use of the CRT Group ISO 9001 Quality Assurance process and procedure documentation and its application to the Fatigue Management System provides practical evidence that the system is in place and is actively working to manage driver fatigue.

An annual assessment of CRT Groups' Fatigue Management System will be undertaken.

In the event of a breach of policy, procedure or legislative compliance by Management, Schedulers or Drivers, Issue Resolution procedures (see section 32 of this manual) shall apply. Breaches shall be rectified, reported and recorded as is necessary and considered in the annual assessment of the Fatigue Management System.



#### 31.3 MANAGEMENT RESPONSIBILITIES

Within CRT Group Fatigue Management is a joint venture with the driver CRT Group management will ensure that schedules are arranged so that drivers can have the proper time off to enable them to comply with all legislative requirements. Schedules must also be arranged so that the maximum weekly hours allowed for the applicable work/rest hours option are not exceeded. In addition, appropriate flexible scheduling will ensure that time for rest will be given each day.

The driver, on the other hand, has a responsibility to recognise the symptoms of fatigue he/she may be experiencing and take the appropriate action, which is to stop immediately and take a rest/nap.

#### 31.4 ROSTERS

CRT Group runs day and night shift rosters and drivers will be advised prior to the following days work what that roster will be. The rosters have been, and will continue to be, flexible in terms of allowing drivers to determine when they can have a break for rest and meals. Rosters will take into account the work/rest option applicable (Standard Hours or BFM) and ensure that there are contingency plans to prevent drivers exceeding their allowable hours. In the event that a driver exceeds the allowable maximum working time for a rostered day, the driver will be rostered to start work later the following day (Mon – Fri) to allow a suitable rest break of 10 hours prior to starting work.

Instances where maximum daily Driver Work Hours are exceeded will be investigated and, if necessary, resters will be altered to ensure that maximum hours are not exceeded in future.

In the event of an early start, rosters will, whenever possible, be arranged for a Friday or Monday, with notice of at least 24 hours prior to the scheduled job. This will allow drivers to adequately plan rest and sleep prior to the job. In both cases, this information will be added to the Run sheet and filed as per Fatigue Management requirements. All daily Run sheets, dockets and Work Diary sheets are to be returned promptly to Operations on the completion of the days work and are to reflect an accurate recording of the days work.

#### 31.5 DRIVER RESPONSIBILITIES

Before starting work each day, drivers must have had the minimum period of Stationary Rest Time stipulated for the Work/Rest Hours option that they are working. Drivers are responsible for managing their activities away from CRT to ensure that they get enough rest/sleep to be able to present themselves for work in a fit condition to carry out their duties in a safe manner for the duration of the shift.

If this is not possible due to personal circumstances, you should advise your Manager as soon as you are able to do so and alternative arrangements can be made. This may include starting work later or finishing work earlier depending on the circumstances of the issue. This particularly applies to employees who are carrying out work other than for CRT Group which prevents them from resting the required amount prior to work with CRT Group the next day.

Drivers are expected to act in a safe manner at all times and all incidents, accidents and or near misses are to be reported as per the current QA and Zoro harm requirements for incident and accident reporting (see section 23 of this manual).

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FATIGUE MANAGEMENT

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#### 31.6 SYMPTOMS OF FATIGUE

The driver has a responsibility to recognise the symptoms of fatigue he/she may be experiencing and take the appropriate action, which is to stop immediately.

Some symptoms of fatigue are:

- Heaviness of the eyes,
- Dimmed vision,
- Pressure in the head and temples.
- Thirst and hunger,
- Stiffness and cramps,
- Irritability,
- Daydreaming,
- Wandering

#### 31.7 MEDICALS

Prior to starting work, drivers are expected to be in a state ready for work. CRT Group policy with respect to Alcohol and Drugs will apply at all times and driver medicals will continue to be held on a regular basis as por the company policy and Heavy Vehicle Driver Fatigue Reform requirements.

Drivers up to the age of 49 years will continue to have medicals within the 3 year period and drivers over the age of 49 years will be required to have medicals every 12 months.

If at any time you have concerns or believe that you may not be in a fit state to commence work, contact your Manager.

#### 31.8 TRAINING

Management and drivers are to ensure that following completion of the Fatigue management training program that the learned outcomes are applied with consideration to legislative frameworks. Training needs are reviewed on an annual basis to ensure compliance and relevance to the operations of the daily work. I raining in Fatigue Management will be undertaken on an annual basis and all operations employees are required to attend in order to be considered as competent in this skill area. All CRT staff involved in the management of heavy vehicles will receive Fatigue Management Training to TLIF1007C as a minimum.

### 31.9 BASIC FATIGUE MANAGEMENT (BFM) PPOCEDURES

#### Introduction:

These procedures outline the processes used by CRT Group to conform to the requirements of the BFM Management Module of the NHVAS Accreditation Scheme.

The vehicle combinations operated by CRT are involved in the carriage of bulk and palletised goods throughout Australia. On occasions, the Company may have to cart from sites not known at this stage, however all operations applicable to BFM will comply with these procedures. The procedures describe how CRT Group will meet the six standards required for BFM compliance

Standard 1 Scheduling and Rostering

Standard 2 Fitness for Duty

Standard 3 Fatigue Knowledge and Awareness

Standard 4 Responsibilities

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FATIGUE MANAGEMENT

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Standard 5

Internal Review

Standard 6

Records and Documentation

#### Standard 1:

#### Schedules and Rosters

All schedules and rosters will be documented and filled by CRT management for a period of 3 years. Schedules and Rosters are completed by the Scheduler then monitored and regularly reviewed by management. Schedules are released in the week preceding the week covered by the schedule. It is the intention of CRT management that all schedules and rosters are planned to be reasonable and achievable under legislative operating limits.

If a schedule needs to be altered the Scheduler will ensure the alteration complies with the fatigue limits, the driver concerned is given adequate notification to permit the driver to refuse if the driver will become unfit for duty, and a 'Notice of Concern'(QIR/SIR?) reporting the alteration is forwarded to management for monitoring and review.

CRT does not use relief/casual or sub-contractor drivers at BFM, unless the relief/casual or sub-contractor drivers have obtained their required statement of attainment and produced a valid medical certificate. Before relief/casual or sub-contractor drivers are used they are required to present their work diary to the scheduler who will ensure they are able to operate legally and to ensure minimal fatigue risk.

The CRT management understands the increased fatigue risk for drivers returning from leave when considering the schedule and rosters. As such drivers are consulted about their roster prior to returning to work from leave or extended breaks.

CRT management permits drivers to have input into schedules where practicable to ensure trip plans are reasonable. Drivers can notify the scheduler of any matters pertaining to scheduling by completing a 'Notification of Concern'.

#### Standard 2 Fitness for Duty

CRT maintains a registry of staff who have obtained their required statements of attainment. This registry also includes evidence of certificate of fitness by a medical practitioner according to the Assessing Fitness to Drive by Austroads (or equivalent document approved by the Australian Transport Council). These procedures require all drivers to undergo an approved medical examination once every three years if aged 49 or under, and yearly for drivers aged 50 or over.

Drivers must inform management of any issues which effect the drivers fitness for duty, including health concerns, use of drug/alcohol, medical conditions, well-being and state of fatigue. CRT provides the drivers with regular education as to causes and effects of fatigue and the drivers can inform management at anytime of a fatigue related concern. The drivers are also required to notify management if they are unfit for duty due to any lifestyle, health or medical issue both before and during work. Once informed of any medical advice applicable to a driver, management will take that advice into consideration when assigning duties.

When operations require two-up driving CRT management will liaise with the drivers to assist in appropriate selection of drivers and the alternative driver's comfort is optimized while resting in a moving vehicle.

#### Standard 3 Fatigue Knowledge and Awareness

CRT will ensure all responsible personnel are trained and qualified to undertake their respective responsibilities. A record of training will be maintained which states who, when and in what the staff member was trained in. If a staff member is found to be contributing to non-conformances CRT will re-train that person.

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FATIGUE MANAGEMENT

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Management will interview one driver and, one manager or scheduler each month to ensure staff can demonstrate competency in managing driver fatigue, including understanding the causes, effects, and symptoms of fatigue, and being able to apply strategies to better manage fatigue. Based on any found deficiencies management will ensure appropriate action is undertaken to address those needs.

CRT shall conduct an induction session for existing and new employees who will be made familiar with the requirements of the BFM Management Systems Procedures and the N.H.V.A.S. Standards and Conditions for Operator Accreditation. Any staff member identified as a Driver of a regulated vehicle or a Scheduler; or a Manager/Supervisor of either Drivers or Schedulers will be required to undertake the applicable statement of attainment for their respective responsibility.

The following identifies when additional training is required:

- (a) Induction of existing and new personnel.
- (b) Safety bulletins
- (c) Introduction of new technology.
- (d) Internal/external audit findings.
- (c) Corrective Action Reports
- (f) Management review.

CRT training records are applicable for Drivers, Schedulers, Supervisors and Managers; and include details of what, if any, training was undertaken, who delivered the training and when this training occurred, if and when any re-training is required, and a record of the qualifications of workers, including any units of competence achieved.

## Standard 4: Responsibilities

CRT Branch Operations Managers hold all Responsibility and Authority for all tasks detailed in these Procedures. CRT delegates company personnel to perform the following tasks for which they have undergone training or are suitably qualified:

Scheduling and Rostering..... Scheduler's Responsibility

Monitoring of Schedules and Rosters ...... CRT Management

Work Diary's ...... Drivers' Responsibility

Record Keeping ...... CRT Management

Notification of Concern ...... Every Staff Member

Authorities and Responsibilities... ......CRT Management

Internal Review......CRT Management

Non-compliance and corrective actions can be reported by any staff member or manager on a Zero Harm Near Miss Report and the procedural response for a non-conformance is covered in Standard 5.

#### Standard 5 Internal Review

The QA/OHS&E Department will schedule when the annual internal review will be conducted, and will use, where practicable, person's independent of the activity being reviewed. The Internal Review will use any document to formulate questions that will ensure that procedures are being followed and that records verify compliance. A written report together with any non-conformance detected, and which may contain suggestions for improvement in procedures, will be produced and implemented by the operator within 14 days of the internal review and all corrective action requests identified during internal review are to be closed out by the person conducting the internal review. Copies of internal reviews are to be retained for reference and external auditing purposes.

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Non-compliance and corrective actions can be reported by any staff member or manager on a Zero Harm Near Miss Report. Any incident will be investigated to determine whether fatigue was a contributing factor. A Zero Harm Near Miss Report must be signed off by management if it relates to a non-conformance or corrective action. If management becomes aware of staff members regularly not completing their area of responsibility then identified staff members will be contacted by management for appropriate correction or counselling. Management will file Zero Harm Near Miss Reports in a specific file.

Management will complete a compliance statement every three months. The Quarterly Compliance Statement will record key performance indicators of a number of nominated drivers, number of submitted Work Diary records, and number of compliant/non-compliant trips. A summary of any non-conformance will be included in the Quarterly Compliance Statement. All Quarterly Compliance Statements will be kept for a minimum of three for auditing and distribution as requested.

CRT management will regularly review driver's work and rest times to ensure compliance with the legislated operating limits by using a fortnightly summary sheet which records work hours, rest time, night hours, and long hours.

#### Standard 6 Records and Documentation

CRT is responsible for the safe storage of the following records:

- All Work Diaries
- All schedules and rosters
- All Zero Harm Near Miss Reports
- Internal reviews
- Training Registry
- NHVAS publications
- Ongoing training records and any other BFM management records

CRT is responsible for ensuring procedures are current and that a copy remains in the vehicle/s, in the schedulers office, in the responsible persons office, and to any other staff member as required. All staff members who are required to have a statement of attainment in their respective roles will also be issued a copy of these procedures. All superseded procedures will be retained. All records and documentation are legible, identifiable and will be available for external audit and kept for a period of three years at the Company offices.

### 31.10 FORMS TO BE USED

Company Run Sheet	CRT QA SM F04
Sub-Contractor Run Shect	CRT QA SM F05
QIR/SIR	CRT QA F08



## 41. WORKPLACE INSPECTIONS

THE PURPOSE OF THIS PROCEDURE IS TO ENSURE THAT REGULAR WORKPLACE INSPECTIONS ARE CARRIED OUT IN ALL CRT GROUP WORKPLACES.



## 41. WORKPLACE INSPECTIONS

#### 41.1 PURPOSE

The purpose of this procedure is to ensure that effective, regular workplace inspections are carried out in all CRT Group work sites.

#### 41.2 SCOPE

This procedure will apply to all CRT Group workplaces. Regular Workplace Inspections are to be carried out in all Warehouses, Offices, Workshops and outdoor work areas under the control of CRT Group.

#### 41.3 WHY ARE WORKPLACE INSPECTIONS REQUIRED?

CRT Group's safety vision is to be world class in its management of safety and to achieve its goal of "Zero Injuries".

CRT Group believes that all Incidents are preventable and a key element in preventing incidents is the identification and treatment of hazards. Workplace inspections are an effective method of identifying hazards and developing implementation plans for treatments. Results of workplace inspections also provide valuable data to OH&S Committees and Management Review Teams evaluating the effectiveness of the Quality, Safety, Food Safety or Environmental Management Systems.

Regular workplace inspections are an important component of CRT Group's Quality, Safety, Environmental and Food Safety management systems.

#### 41.4 WHEN WILL WORKPLACE INSPECTIONS BE CARRIED OUT

Workplace Inspections should be carried out in each work area on a monthly basis. Timing within the month may vary from site to site depending on local circumstances. However, the inspections must be carried out within a timeframe that allows the results of the inspection, including recommendations and/or implementation plans for any corrective actions required, to be provided to the next scheduled OH&S Committee and Management ReviewTeam meetings for review.

Inspections should also be scheduled prior to the work group monthly Tool Box Talk so that Issues identified by the inspection can be discussed with the work group members.

## 41.5 RESPONSIBLE PERSONS

Responsibility for ensuring that the Workplace Inspection is carried out within the required timeframe lies with the Work Group Manager / Supervisor.

Idealy, the inspection should be carried out by an inspection team. The team should include a Supervisor with sufficient authority to implement immediate corrective action if necessary, the OH&S Representative for the area and another worker. This is to be kept by the Branch Manager or Supervisor who will initiate any QIR's or SIR's and a copy forwarded to the QA/OHSE Department. This will be reviewed by the QA/OHS&E Department to ensure that Workplace Inspections are carried out within the required timeframe.

FORMS TO BE USE	Lora G	md.
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Site Inspection Form CRT QA SM F08

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SMXX WORKPLACE INSPECTIONS

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From:

Cain, Matthew (Mount Isa - Copper)

Sent:

Wednesday, 6 April 2011 1:10 PM

To:

Kuzmanovic, Adam (Mount Isa - Copper); Healy, Margot (Mount Isa - Copper)

Cc:

Sharkey, Merv (Townsville - Copper)

Subject:

FW: Emailing: IMG00159-20110405-1047.jpg, IMG00160-20110406-0727.jpg

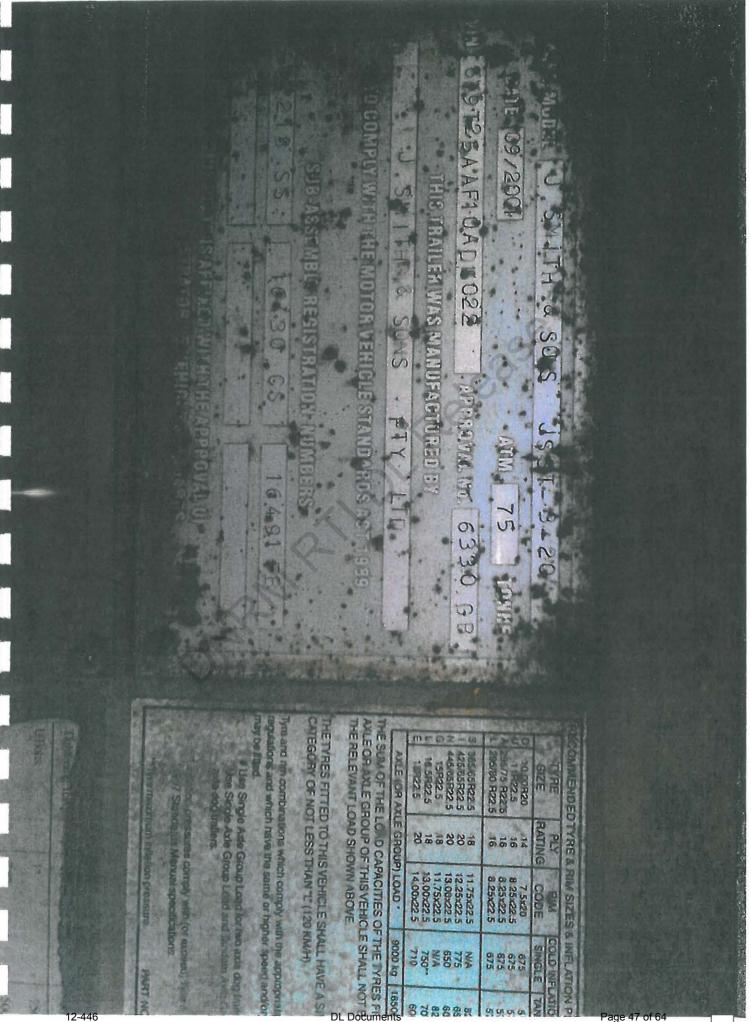
Attachments:

IMG00160-20110406-0727.jpg

The Anode trailer is rated to 75 tonne. It was carrying approximately 56 tonne at the time of the incident.

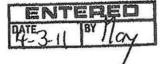
Adam can you please include this in the evidence log. Thanks, Matt.







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## Application for Contractor ID Card

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