CSHP TEMPLATE (Simplified)

DOCUMENTARY REQUIREMENTS AND FORMAT IN THE PREPARATION OF CONSTRUCTION SAFETY AND HEALTH PROGRAM (CSHP)

For Two Storey Below (Construction of Residential Building) or minor repair works with less than 10 workers

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PROJE	PROJECT DESCRIPTION	
	a. Title of the Project	
	b . Location of the Project	
	c. Project Classification (Residential/Renovation/New construction/Additional Floors/Rooms)	
	d. Project Owner/Contact No.	
	e. Name of the Project In charge (Engineer/Architect-contact no.)	
	g. Estimated No. Of Workers to be deployed	
	h . Estimated duration of the project (days/months)	
	I. Specific Scope of Works to be undertaken	
Page Three SIMPLE CSHP TO CONTAIN THE FOLLOWING BASED ON THE PROGRAM/ SCOPE OF WORK TO BE UNDERTAKEN		
DE UIN		
	 a. Introduction – To reflect the management commitments to implement the Workplace Safety and Health Policy and to explain to its workers 	
	□ b. Occupational Safety & Health (OSH) Policy/ Program to be implemented – must be signed and approved by the owner and must also be signed by the one who prepared the said policy/program.	
	□ c. Construction Safety & Health Committee Organization − Chaired by the Owner with emphasis on the Duties and Responsibilities of the members.	
	□ d. To Provide Workers Welfare Facilities (e.g. comfort room, emergency medicines and treatment room, drinking facilities and other OSH related facilities)	
	□ e. Personal Protective Equipments (PPE's) – provision of PPE's shall be in	
	accordance with Rule 1080 of the OSHS. PPE's should be shouldered by the Owner whenever necessary in case of hazardous work areas.	
	☐ f. Construction Safety Procedures – based on the scope of works to be undertaken	
ATTAC	HMENTS:	
	1. Copy of the certificate of Training of the designated Safety Officers (BOSH/CST), and	
	a license certificate of an engineer in charge, if any.	
	2. Copy of the certificate of Training and ID of First Aider or Nurse based on the Number	
	of workers deployed (Refer to Rule 1960 of OSH handbook)	
	3. Photocopy of valid PCAB License of contractor (for projects with contactor)	
	4. Proof of Purchase/Existence/Availability of Emergency Medicines/Fist Aid Kit to be	
	used in the construction site. –(attached pictures or receipts)	