

**Subcontractor Safety Authorization & Competent Person Designation****Subcontractor:** \_\_\_\_\_**Project:** \_\_\_\_\_**Brief Description of Work:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Designated Competent Person:** \_\_\_\_\_**Title of Competent Person:** \_\_\_\_\_**Cell No. of Competent Person:** \_\_\_\_\_**Email of Competent Person:** \_\_\_\_\_**Alternative Competent Person:** \_\_\_\_\_**Cell No. of Alt. Comp. Person:** \_\_\_\_\_**Date:** \_\_\_\_\_

The above Subcontractor was contracted to perform work for the above referenced Project.

As defined by OSHA provision 29 CFR 1926, we have designated the above named person as our Competent Person for this Project and an Alternative Competent Person if the Competent Person is not available. We understand that the expectation is that one or both Competent Person(s) will be onsite while work is being performed by our company, and that these people hold a minimum of OSHA 30-hr safety training. Additionally, this person can communicate in English and also has the ability to communicate to every member of their team on site, either directly or through an interpreter.

This person(s) understands OSHA standards as applied to the construction industry and any other safety requirements of the crew as set forth in the Shawmut Safety Manual. Said person has full authority to take immediate and corrective action, if necessary, to ensure the safety of our employees at this site.

By signing below, I confirm that I am an authorized agent for the company stated above and ultimately accountable for the safety of our employees. In addition, I am the contact for all compliance issues; including training, disciplinary action, and overall safety compliance.

**Print:** \_\_\_\_\_**Signature:** \_\_\_\_\_**Title:** \_\_\_\_\_