

SAFETY MANAGEMENT SYSTEM - CONTRACTOR AUTHORITY FORM

Authority to operate under the Operator ("Thiess") Safety Management System (SMS)

I, _____ (Print name) as authorised representative for Sedgman Ltd, hereby authorise _____ (insert Contracting Company name) to operate (tick one below):

- Fully under the Thiess 'Mt Pleasant' SMS
- In conjunction with the Thiess 'Mt Pleasant' SMS and relevant sections of the Contracting Company's SMS where this may apply specifically to a defined task as listed below.

Relevant Sections of Contracting Company's SMS

_____ Date: ____/____/____

Signature (Sedgman Authorised Representative)

I, _____ (Print name) as authorised representative for _____ (insert Contracting Company name) hereby accept to comply with the requirements of the Thiess Mt Pleasant Safety Management System (SMS) where indicated. I will authorise work to cease in any event where further clarification is required.

_____ Date: ____/____/____

Signature (Authorised Contractor Representative)