DOCUMENT 1 ANNEXURE 3

OCCUPATIONAL HEALTH AND SAFETY ACT, 1993 (Regulation 4 of the Construction Regulations, 2014)

NOTIFICATION OF CONSTRUCTION WORK

| Name and postal address of Principal Contractor: |
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| Name and telephone nr. of Principal Contractor's contact person: |
| Principal Contractor's Compensation Registration Number: |
| Name and postal address of Client: |
| Name and telephone nr. of Client's contact person or agent: |
| Name and postal address of Designer(s) for the Project: |
| Name and telephone nr. of Designer(s) contact person: |
| Name and telephone nr. of Principal Contractor's Construction Supervisor on Site as appointed in terms of Regulation 8(1): |
| Name(s) of Principal Contractor's Sub-ordinate Supervisors on site as appointed in terms of Regulation 8(2): |
| Exact physical address of the Construction Site or Site Office: |

| Expected commencement date: | | |
|--|-------------------------------------|--|
| Expected completion date: | | |
| stimated maximum number of persons on the Construction Site: | | |
| Total: Male: | Female: | |
| Planned number of Contractors on the Construction Site a | ccountable to Principal Contractor: | |
| Name(s) of Contractors already selected: | | |
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| Principal Contractor | Date | |
| | | |
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| lient's Agent (where applicable) | Date | |
| | | |
| | Date | |
| Client | Date | |