**OCCUPATIONAL SAFETY DECLARATION**

**We, ………………………………………. (name of business entity)** (……………………………**address**), as a contracted partner of **AH.Zrt.**  (1119 Budapest, Petzvál József utca 31-33.) hereby declare, in accordance with the occupational safety risk assessment and evaluation prescribed in Section 54 (2) of Act XCIII of 1993 on Labour Safety, that

* We employ an individual (with the qualification and in the number of working hours prescribed by law) having specialised qualifications in occupational safety, managing the performance of work from the aspect of occupational safety,
* We have regularly updated occupational safety regulations and instructions in place,
* We take the necessary actions to ensure observance of, and compliance with, the relevant occupational safety related statutory regulations and that the management of health and safety is an inseparable part of our business activities:
  + we have the required procedures in place as required for identifying and controlling risks pertaining to the performance of work,
  + we use methods and elaborate a system for the performance of work that are safe and whose application does not entail any unnecessary health related risks,
  + we prescribe the use primarily of collective protective equipment,
  + we prescribe the use of individual protective equipment in view of the results of prior occupational safety related risk assessment,
  + we have sufficient expert resources for the performance of work in a safe manner,
  + we have a system in place for supervising and controlling compliance with the health and safety regulations,
  + we employ an occupational health service provider performing the tasks prescribed by law (e.g. preliminary and periodical job SUITABILITY examinations etc., as required for work),
  + we have an emergency and rescue procedure in place,
  + we fulfil the requirements prescribed in Joint Decree 3/2002. (II. 8.) SZCSM–EüM,
  + in case Joint decree 4/2002. (II.20.) SzCsM-EüM applies to our regulation, upon handing over the work site we also hand over the name and telephone number of our health and safety coordinator.
  + if employees of more than one contracted partners work simultaneously at a given place of work, their activities shall be so coordinated that it will not entail hazards threatening those working at the site or within a reasonably determined distance. (Coordination involves particularly keeping the employees concerned and their occupational safety representatives as well as those staying within a range affected by work about health and safety risks/hazards as well as the precautionary actions taken. Coordination is, indeed, our responsibility!)
  + we acknowledge that **AH.** **Zrt.** will check compliance with the occupational safety regulations (e.g.: by calling for the Occupational Safety Code, the risk assessment, technological description and the training registry),
  + in relation to the assignment at hand we notify **AH.Zrt**’s occupational safety officer of any and all accidents that have involved/affected our employees and/or subcontractors, within 24 hours of the incident, in writing, in sufficient detail,
  + we never engage in any form of employment without proper registration and we apply and enforce, and enable our employees to enforce, all of the relevant fundamental rights.

……………………….., .... (day) .... (month) 20...

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(name and position of the person authorised to issue the declaration)

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