



Project Name _____ Safety & Health Officer: _____

Site Address _____

Hospital _____ Police _____ Ambulance _____ Fire Dept. _____

General Contractor _____ Proj. Supt. _____
Foremen _____

Worker Rep. _____

Safety & Health Committee

Management			Workers		
Name	Occupation	Representing	Name	Occupation	Representing
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Subcontractors

Company Name	Phone #	Site Supervisor	Worker Representative
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For additional information or topic material, contact the MBCSP offices:



Winnipeg Office
290 Burnell Street
Winnipeg, MB R3G 2A7

Brandon Office
950 - 10th Street, Unit B
Brandon, MB R7A 6B5

Phone: 775-3171
Fax: 783-6446

Phone: 728-3456
Fax: 727-1048