## Form 3:Establishment of Health and Safety Committee

* + 1. Enterprise: ……………………………………………………………………..

Address ………………………………………………………………

Tel: …………… Fax: …………… e-mail……………………………

* + 1. Nature of Business: …………………………………………………………
		2. Number of Employees: …………………………………………………….
		3. Composition of Health and Safety Committee

Chairperson: ……………………………………………………………….

Members: …………………………………………………………………..

 …………………………………………………………………

 …………………………………………………………………

 …………………………………………………………………

 …………………………………………………………………

Secretary: …………………………………………………………………

Establishment Date: ……………………………………………………

**I hereby certify that the above particulars are true and correct to the best of my knowledge.**

Name & Signature of Employer

Date