## 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: …………………………………………………………………..

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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