

**~ Safety/HazCom Program Verification ~**

**TO:**

**DATE:**        October 21, 2020

By checking the following spaces we verify that (check all that are true):

- Yes, we have a written Safety Program that is current and meets all OSHA requirements.
  
- Yes, we have a written HazCom Program that is current and meets all OSHA requirements.
  
- Yes, all our employees have had up-to-date safety training that meets or exceeds all OSHA requirements for our Scope of Work.

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**SUBCONTRACTOR**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Printed Name & Title**

\_\_\_\_\_  
**Date**