

## COVID-19 Alert Level 3 – Checklist for suppliers and NHV team members for site visits

## Information required

Name	
Company	NH Valuers
Address of Site/Property	
Date of Site Visit	
Time of Site Visit	

Please complete the following checklist, before, during and after your site visit. If you are unable to comply with the requirements set out below for any reason, please stop work and contact NH Valuers' office as soon as possible.

Note – this checklist does not replace the normal health and safety requirements including, hazard identification, elimination, or control. This checklist is to be used in addition to our company health and safety policy, compliance with legislation and any instructions from our client or the landowner/occupier.

## Before leaving your home or office, please complete the following checklist:

	Confirm		
I and my colleagues are well and have not:			
had COVID-19 or any flu-like symptoms in the past 14 days			
<ul> <li>been in contact with anyone that has/had COVID-19 or is suspected of having COVID- 19.</li> </ul>	_		
I have made access arrangements prior to visiting the site including, where possible:			
leaving the property unoccupied, if possible			
securing any animals on the property	Ш		
leaving doors open if possible			
I will travel to the site by myself, in my own vehicle. If the task requires multiple team members from separate bubbles then each team member will also take their own vehicle.			
I understand that physical distancing of 2m from other people should be maintained throughout the site visit. No handshakes.			



I will sanitise/wash my hands before and after the site visit and try to avoid touching door handles and other surfaces. Ask the occupier to open doors for you.					
I understand to cough or sneeze into my elbow.					
I will try to avoid touching public surfaces on my way to/from the site.					
I will not share any items such as plans, devices or files with anyone including team members.					
For the purposes of contact tracing, I will keep a record of anyone I interact with whilst on site or on the way to/from the site, including day/time, location and name and contact details if known.					
Upon arri	val at the site	e please compl	lete the following checklist:		
The occupant(s) are well and have confirmed (either verbally and/or on our 'Occupant Declaration' that they have not:					
had COVID-19 any flu-like symptoms in the past 14 days					
<ul><li>been</li><li>19.</li></ul>	in contact w	vith anyone th	nat has/had COVID-19 or is suspected of having COVID-		
The occupant is comfortable with the inspection being completed					
Upon leav	ring the site p	olease complet	te the following checklist:		
I have/will sanitise/wash my hands upon leaving the site visit					
•	urposes of coron the site:	ontact tracing,	below is a list of people I interacted with whilst on site or	r on the	
Date	Time	Name	Contact details		