





Please state which of the following you provide: Road freight  Sea freight  Air freight

## Section 2 (Road freight only)

Do you operate your own vehicles? Yes  No

If **yes** please confirm your Operators License number:

Do you carry Dangerous Goods? Yes  No

If **yes** to the above please provide us with the following;

Name of Dangerous Goods Advisor:	
Certificate number:	Expiry date:

Which classes can you **NOT** carry?:

Do all your vehicles carrying dangerous goods comply with ADR legislation? Yes  No

Do all your drivers who undertake dangerous goods movements hold training certificates? Yes  No

In addition, have these drivers received security training in relation to ADR Chapter 1.10? Yes  No

You must ensure that any driver collecting dangerous goods on our behalf should carry means of identification, including their photograph, throughout the duration of the carriage in compliance with ADR Chapter 1.10.1.4. This is in addition to all safety equipment referred to in ADR Chapter 8.1.

## Good in Transit/Freight Liability insurance

Name of Insurer:
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Level of insurance: CMR  BIFA  RHA  Other (Please State) \_\_\_\_\_

Policy number:	Expiry date:
Please state maximum liability in any one claim:	
Please state any exclusions:	
<input type="text"/>	





**If you operate your own vehicles please fill in the below.**

### Vehicle Safety

Name of CPC holder:
Certificate number:

### Recruitment Checks

- Do you make recruitment checks to validate the identity of drivers? Yes  No
- Do you obtain identification of drivers, such as driver's license and passport? Yes  No
- Do you make periodical reviews of such documentation? Yes  No
- Do you subcontract? Yes  No

**If you sub-contract please fill in the below.**

- Do you ensure that your subcontractors hold parallel Goods in transit cover to your own? Yes  No
- Do you ensure that your subcontractors hold adequate Public Liability insurance? Yes  No
- Do you ensure that your subcontractors comply with all provisions of ADR where applicable? Yes  No
- Do you ensure that your subcontractors make, and periodically review Recruitment checks to validate their identity and suitability for their role? Yes  No
- Do you ensure that your subcontractors give due consideration to Health & Safety? Yes  No
- Do you ensure that your subcontractors hold a CPC license? Yes  No
- Do you ensure that your subcontractors maintain their vehicles? Yes  No
- Do you enquire as to your subcontractor's opinions towards environmental issues? Yes  No
- Do you monitor your subcontractors' performance and de-list unsatisfactory subcontractors? Yes  No





I T A L L O G I S T I C S L I M I T E D

## Section 3 (Sea freight only)

Do you facilitate for the sea movement of hazardous cargo in accordance with IMDG?

Yes  No

When facilitating sea movement in accordance of IMDG have all persons involved received training commensurate with their duties?

Yes  No

### Good in Transit/Freight Liability insurance

**Name of Insurer:**

**Level of insurance:** BIFA  Other (Please State)

Policy number:	Expiry date:
Please state maximum liability in any one claim:	
Please state any exclusions:	

## Section 4 (Air freight only)

Do you facilitate for the air movement of hazardous cargo in accordance with IATA?

Yes  No

When facilitating air movement in accordance of IATA have all persons involved received training commensurate with their duties?

Yes  No

### Good in Transit/Freight Liability insurance

**Name of Insurer:**

**Level of insurance:** IATA  CAA  Other (Please State)

Policy number:	Expiry date:
Please state maximum liability in any one claim:	
Please state any exclusions:	





## Section 5 (All)

On behalf of (Company name):	
Name of person completing this form:	
Position/Status of person completing this form:	
Signature:	Date:

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