

Contract Statistics	HSE Performance of Contractor: XXXXX							Contract No: XXXXX		
Data	Exposure hours	No. of Fatalities	No. of Permanent Total Disabilities	No. of Lost Workday Cases	No. of Restricted Workday Cases	No. of Medical Treatment Cases	No. of First Aid Cases	Total number of env. non-conformance	Total number of e-spills	Total number of Occ. Illnesses
Date	Exp. Hours	FAT	PTD	LWC	RWC	MTC	FAC	E-nonc	E-spill	Occ
JAN										
FEB										
MAR										
APR										
MAY										
JUN										
JUL										
AUG										
SEP										
OCT										
NOV										
DEC										
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Enter contract and Contractor details

Enter contractor performance data

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Date	Exp. Hours	FAT	PTD	LWC	RWC	MTC	FAC	E-nonc	E-spill	Occ
<b>2006 - TOTAL</b>										

Enter contractor CUMULATIVE performance data for 2007

HSE Improvement Activities				
Activity	follow up		actions	comments on follow-up
	BPR	FIELD		

Please insert any specific activities to improve HSE performance