PURCHASE CHECKLIST

Description of Item(s) to be Purchased:		
Suggested Supplier:		
Person Requesting the Purchase:	Date:	

This document can be used to confirm that the health, safety, environmental and quality requirements have been considered prior to purchasing equipment or materials.

All items are to be completed by the person requesting the purchase and checked by the person authorising the purchase.

This form may be used for any hazard or issue.

Please complete this form and forward to the appropriate person/s.



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Pre-Purchase Health and Safety Considerations	Tick if Required			Verification Following Receipt of Order
Plant safety legislation	Yes	□No	□ N/A	
Operator Licence, permit, certificate of competency	Yes	□No	□ N/A	
Registration of plant and equipment	Yes	□No	□ N/A	
Public safety legislation	Yes	□No	□ N/A	



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Pre-Purchase Health and Safety Considerations	Tic	k if Requir	Verification Following Receipt of Order	
Vapours	Yes	□No	□ N/A	
Heat/cold	Yes	□No	□ N/A	
Vibrations	Yes	□No	□ N/A	
Lighting levels	Yes	□No	□ N/A	



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Pre-Purchase Health and Safety Considerations

Tick if Required

Verification Following Receipt of Order



Person Authorising the Purchase:

Signature:

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