



Health & Safety Agreement

Camera Tracking Vehicle & Driving Services

PRODUCTION

Production Title / Working Title:	<input type="text"/>	Shooting date/s:	<input type="text"/>
Production Company:	<input type="text"/>	Location/s:	<input type="text"/>
Production H&S policy received:	Yes <input type="checkbox"/> No <input type="checkbox"/>	BATT H&S policy acknowledged:	Yes <input type="checkbox"/> No <input type="checkbox"/>

KEY CONTACTS

Producer:	Name:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
Production Manager:	Name:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
Location Manager:	Name:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
1st Assistant / Equivalent:	Name:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
Camera Grip:	Name:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
Other key contact:	Name:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>

COMPLIANCE

Production Insurance company	Name:	<input type="text"/>
	Organisation:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
	Policy No:	<input type="text"/>
Local Authority Approval Contact:	Name:	<input type="text"/>
	Organisation:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
	Approved:	Yes <input type="checkbox"/> Pending <input type="checkbox"/> No <input type="checkbox"/>
Local Law Enforcement Approval Contact:	Name:	<input type="text"/>
	Organisation:	<input type="text"/>
	Email:	<input type="text"/>
	Phone:	<input type="text"/>
	Approved:	Yes <input type="checkbox"/> Pending <input type="checkbox"/> No <input type="checkbox"/>

ACKNOWLEDGMENT

Accountable Production Contact:	Name:	<input type="text"/>
	Role:	<input type="text"/>
	Date:	<input type="text"/>
	Signed:	<input type="text"/>

This agreement should form part of the safe working procedures of a fully risk-assessed and safety-insured screen / media production.

Please complete, sign and return to email address below prior to commencement of shoot.

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