



Canadian Mineral Exploration Health & Safety Survey 2010

In completing this form please note the following:

- The form should be completed by junior companies, major companies, government geological surveys, diamond drilling contractors, geophysical contractors, and any other companies or contractors carrying out exploration related activities in Canada.
- We ask companies to submit in the spaces below a close estimate of the number of person days worked in 2010 by company employees and contractors for the following:

- Surface exploration and geological field work** which includes line-cutting, geophysical, geochemical, trenching, etc.
- Surface drilling**
- Underground exploration** including underground drilling, mining, and geological work

Please include the names of contractors so that we do not duplicate information. These names will not be published.

- Complete all the required fields; (*) indicates required fields.
- If you have any questions about the form please contact Jonathan Buchanan at 604-630-3923 or jbuchanan@amebc.ca.
- All information will be kept confidential, and Personal Information Protection and Electronic Documents Act mandates will be maintained.

Name of Person & Company Responsible for Safety
(*Required Fields)

*Name:		
*Title:		
*Company Name:		
E-mail:		
<u>Address Information</u>		
Phone:		
*Street Address:		
Street Address 2:		
*City:		
*Province/Territory:		Postal Code:
*Does your organization have a Health and Safety Program: Yes___ No___ *Does your organization discuss safety at staff meetings or hold safety meetings? Yes___ No___ *Do you discuss recent near misses at staff meetings? Yes___ No___		
*Reporting Period:	2010	

Company:							
Names of Contractors:							
Estimated mineral exploration expenditures in Canada in 2010		\$					
Provide total Person – Days worked (e.g. number of employees multiplied by number of days worked) in each province or territory for both employees and contractors							
Worksite Location 1:	Prov./Terr. _____	Days worked:	<table style="width:100%; border:none;"> <tr> <td colspan="2" style="border:none;">PERSON DAYS WORKED</td> </tr> <tr> <td style="border:none; width:50%;">EMPLOYEES</td> <td style="border:none; width:50%;">CONTRACTORS</td> </tr> </table>	PERSON DAYS WORKED		EMPLOYEES	CONTRACTORS
PERSON DAYS WORKED							
EMPLOYEES	CONTRACTORS						
	a) Surface exploration and geological work:	_____	_____				
	b) Surface drilling:	_____	_____				
	c) Underground exploration:	_____	_____				
	Length of workday in hours (e.g. 8, 10, 12): _____						
Worksite Location 2:	Prov./Terr. _____	Days worked:	<table style="width:100%; border:none;"> <tr> <td colspan="2" style="border:none;">PERSON DAYS WORKED</td> </tr> <tr> <td style="border:none; width:50%;">EMPLOYEES</td> <td style="border:none; width:50%;">CONTRACTORS</td> </tr> </table>	PERSON DAYS WORKED		EMPLOYEES	CONTRACTORS
PERSON DAYS WORKED							
EMPLOYEES	CONTRACTORS						
	a) Surface exploration and geological work:	_____	_____				
	b) Surface drilling:	_____	_____				
	c) Underground exploration:	_____	_____				
	Length of workday in hours (e.g. 8, 10, 12): _____						
Worksite Location 3:	Prov./Terr. _____	Days worked:	<table style="width:100%; border:none;"> <tr> <td colspan="2" style="border:none;">PERSON DAYS WORKED</td> </tr> <tr> <td style="border:none; width:50%;">EMPLOYEES</td> <td style="border:none; width:50%;">CONTRACTORS</td> </tr> </table>	PERSON DAYS WORKED		EMPLOYEES	CONTRACTORS
PERSON DAYS WORKED							
EMPLOYEES	CONTRACTORS						
	a) Surface exploration and geological work:	_____	_____				
	b) Surface drilling:	_____	_____				
	c) Underground exploration:	_____	_____				
	Length of workday in hours (e.g. 8, 10, 12): _____						
Worksite Location 4:	Prov./Terr. _____	Days worked:	<table style="width:100%; border:none;"> <tr> <td colspan="2" style="border:none;">PERSON DAYS WORKED</td> </tr> <tr> <td style="border:none; width:50%;">EMPLOYEES</td> <td style="border:none; width:50%;">CONTRACTORS</td> </tr> </table>	PERSON DAYS WORKED		EMPLOYEES	CONTRACTORS
PERSON DAYS WORKED							
EMPLOYEES	CONTRACTORS						
	a) Surface exploration and geological work:	_____	_____				
	b) Surface drilling:	_____	_____				
	c) Underground exploration:	_____	_____				
	Length of workday in hours (e.g. 8, 10, 12): _____						

If additional space is required attach additional copies

Did you experience any incidents (either lost-time or without lost-time)?

*Yes__ No__

***If YES, please complete the following form.**

Corporate and personal information will not be published

If additional space is required attach additional copies.

Date (month-day-year)	Location	Prov/Terr	Occupation	Employee or Contractor (please specify)	Type	Lost Time (in days)	Nature of Injury	Cause of Injury	Description of Incident (include factors such as experience, training, time of day that may have contributed)	Action Taken

- | | | | | | |
|---|--|--|---|---|--|
| Occupation:
1-Driller
2-Driller Helper
3-Miner
4-Geologist
5-Field Assistant
6-Geophysicist
7-Line Cutter
8-Surveyor
9-Cook
10-Other | Type:
1-NM (near miss)
2-FA (first aid)
3-MA (medical aid) | Nature of Injury:
1-Sprain
2-Cut
3-Skeletal
4-Bruise/Muscular
5-Allergies
6-Substance Abuse
7-Frostbite
8-Eye
9-Chemical or Burn/Scald | 10-Pre-existing Illness/Seizure
11-Back
12-Hyperthermia
13-Skin
14-Internal
15-Fatality
16-Other
17-None | Cause of Injury:
1-Slip/Fall
2-Airplane
3-Helicopter
4-Snowmobile
5-Automobile
6-ATV
7-Vehicle (Other)
8-Boat
9-Improper Lifting
10-Falling Object
11-Other Object Related
12-Drilling Machinery Related | 13-Camp Equipment Related
14-Tool Use
15-Weather
16-Field Work
17-Animal
18-Chemicals
19-Improper operation (e.g. did not follow procedures)
20-Drowning
21-Medical Condition
22-Other
23-None |
|---|--|--|---|---|--|

Date: _____

Company: _____