**Tier 2 Safety Certification of Compliance**

Required for all Tier 2 Suppliers or Subcontractors entering the shipyard or NASSCO facilities. Tier 2 suppliers are those under NASSCO contract who meet the following criteria:

* 1. **Delivery**: Suppliers / Subcontractors who are required to enter the shipyard or any other NASSCO facility who only deliver materials or supplies to NASSCO warehouses or non-production NASSCO facilities.
	2. **Visitor**: Suppliers/Subcontractors who are required to enter the shipyard or any other NASSCO facility for meetings, consulting, or catering deliveries in non-production NASSCO facilities.

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| --- | --- |
| Company: |  |
| Address: |  |
| City: |  | State: |  | Zip Code: |  |

|  |  |
| --- | --- |
| Work Location at NASSCO or contract location: |  |
| **DETAILED** description of work to be conducted |  |

Person designated by your company to respond to safety violations, anytime, including weekends:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Phone: |  |
| Title: |  | E-mail: |  |

I confirm that I have received and reviewed a copy of the “**Notice of Safety Requirements for General Dynamics NASSCO**” and the **NASSCO Basic Safety Requirements** **Brochure**. I will comply with the requirements established therein. I certify that I have correctly and completely represented the nature and scope of the activities to be performed by this company at NASSCO.

|  |  |  |  |
| --- | --- | --- | --- |
| Printed Name: |  | Date: |  |
| Signature: |  |

**For multiple employees entering NASSCO please use the following page to provide their information and acknowledge their commitment to comply with all safety requirements.**

SEND COMPLETED FORM BY E-MAIL OR MAIL TO:

**NASSCO Safety Department**

**E-Mail:** safety@nassco.com

**Phone:** 619-544-8444

**Mail:** PO BOX 85278 || Attn: Safety Department MS 27 || San Diego, CA 92186-5278

**ACKNOWLEDGEMENT OF REQUIREMENTS**

I confirm that I have received and reviewed a copy of the “**Notice of Safety Requirements for General Dynamics NASSCO**” and **the NASSCO Basic Safety Requirements** **Brochure**. I will comply with the requirements established therein. I certify that I have correctly and completely represented the nature and scope of the activities to be performed by this company at NASSCO.

|  |  |  |
| --- | --- | --- |
| **PRINTED NAME** | **SIGNATURE** | **DATE** |
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