

# Verlingue Supervisor/Manager Questionnaire

## Section 4 Use of Machinery/Equipment

Name of injured party:	
What machinery/equipment was in use? (Include plant/serial number)	
Who was operating the machinery/equipment at the time of the accident?	
Was the operator authorised/trained in its use?	
<b>If Yes, by whom?</b>	
Were all the fences/guards provided with the machinery/equipment in place?	
<b>If No, please provide full details.</b>	
Was the machinery/equipment in working order?	
<b>If No, please provide full details.</b>	
Was the machinery/equipment being operated correctly?	
<b>If No, please provide full details.</b>	
Was the machinery/equipment in any way defective?	
<b>If Yes, please provide full details:</b>	
<ol style="list-style-type: none"> <li>1. Identify who inspected the machinery and when.</li> <li>2. Were any changes made? Please enclose any reports issued.</li> </ol>	
When was the machinery/equipment last inspected/maintained?	
Are maintenance records available?	
Who was responsible for the maintenance?	
Have they been advised of the accident?	

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### Other relevant information:

### Declaration

I/we declare that the above statements are true and correct to the best of my/our knowledge and belief.

I/we agree to provide insurers with any further information as they may reasonably request.

I/we understand that Verlingue Limited do not admit liability by the issue of this claim.

Name	
Position	
Signature	
Date	