

September 4, 2018

## VENDOR BUY-OFF REQUEST CHECKLIST

This checklist is intended for use by our supported clients when requesting Options Incorporated to provide onsite support to a third party vendor.

1. Vendor name & address.	
<ol> <li>Vendor onsite contact name, phone number, &amp; e-mail.</li> </ol>	
3. Details/scope of the specific task to be completed onsite at the vendor.	
<ol> <li>Is PPE required? If Yes, detail the specific hazard &amp; required PPE.</li> </ol>	
<ol> <li>Proposed date/timings of the onsite vendor visit.</li> </ol>	
<ol> <li>Is mileage approved to the vendor? If Yes, indicate approved mileage.</li> </ol>	
7. Does vendor require Contractor WSIB Clearance Certificate?	
8. Does vendor require Contractor Proof of Insurance Certificate?	
9. Does vendor require Contractor EHS acknowledgement?	

Any questions or concerns, please contact the undersigned at 519-993-5705 or e-mail at ttempleman@oiweb.com.

Troy Templeman Manager





