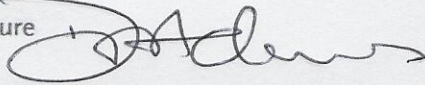
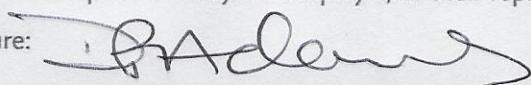


# Safety Representative: Inspection form

Record that an inspection by a safety representative or representatives has taken place.	
Date and time of inspection: 25/09/2025 13.00	
Area or workplace inspected: LEARN LE PROSPER SCHOOL - OLD ROAD - CLACTON	
Name(s) and signature(s) of safety representatives taking part in the inspection FRIDDIE DAWKINS F.R. Dawkins	Name(s) and signature(s) of employer (or their representative) taking part in the inspection (if appropriate) PAUL ADAMS
Record of receipt of inspection form by the employer (or their representative)	
Signature 	Date 25/09/2025

This record does not imply that the conditions are safe and healthy or that the arrangements for welfare at work are satisfactory

## Safety Representative: Report form

Notification to the employer (or their representative) of conditions and working practices considered to be unsafe or unhealthy and of arrangements for welfare at work considered to be unsatisfactory.	
Date and time of inspection: 25 SEPTEMBER 2025	
Particulars of matter(s) notified to employer or their representative (include location where appropriate)	(This column to be completed by the employer) Remedial action taken (with date) or explanation if not taken. This information to be relayed to safety representative(s)
<u>NONE</u>	<u>NONE</u>
Name(s) of safety representative(s) notifying matter(s) to employer or their representative F.R. Dawli	Signature of employer or their representative
Signature(s) of safety representative(s): F.R. Dawli	Date: 25/09/2025
Record of receipt of form by the employer, or their representative(s): Signature: 	Date: 29.09.25

This report does not imply that the conditions are safe and healthy or that the arrangements for welfare at work are satisfactory in all other respects