



Container Terminal, Breakwater Road, Dublin 1.
Telephone (01) 607 5700. Fax (01) 607 5623

HAULIER INDUCTION AND SAFETY PROCEDURES

Company Name	
Address	
Contact Name	
Contact Number	
Contact E-mail	
Driver Name	
	BLOCK CAPITALS
Driver ID	*
	<i>* To be inserted by DFT</i>

I hereby confirm the above named driver

1. Has read, fully understands and accepts the attached **Driver Rules of Entry Record Sheet** and has signed same.
2. Has viewed the following on the web portal <https://icgterminals.com/dublin-ferryport-terminals/>
 - a. **DFT Terminal Induction video**
 - b. **DFT Visitor Rule Book**
 - c. **Site Plan and Truck Driveway Layout**
 - d. **DFT Privacy Notice**
3. Has familiarised themselves with the Health and Safety Authority (HSA) Code of Practice for Health and Safety in Dock Work at the below link
https://www.hsa.ie/eng/Publications_and_Forms/Publications/Docks_and_Ports/

We have carried out the above induction processes No. 1 to No. 3 to protect the Health and Safety of the above named driver in line with the Safety, Health and Welfare at Work Act 2005.

Signed on Behalf of:-

COMPANY NAME	
PERSON RESPONSIBLE	
POSITION	
	ALL BLOCK CAPITALS
Signature	

Note: This form must to be signed off by a Director or person responsible for Health and Safety
This Completed form accompanied by Driver Rules of Entry and Record Sheet to be sent to DriverInductions@dft.ie