

# GOVERNMENT OF SAINT LUCIA

# Ministry of infrastructure, ports, energy and labour

Union Office Complex

Union, Castries

Saint Lucia, West Indies Telephone Number: 1-758-468-4300 Fax Number: 1-758-453-2769

Email: [pssec\_mincom@gosl.gov.lc](mailto:pssec_mincom@gosl.gov.lc)

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| **APPLICATION TO OPERATE - QUARRIES, CONCRETE & CONSTRUCTION SITES** | | | | | | |  |  |  |  |
| **Under the Emergency Powers (Disasters) (Covid-19) (Curfew) (No. 6) Order** | | | | | | |  |  |  |  |
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| **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |  |  |  |  |  |  |  |  |
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| Name of Company/Employer: | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Site Location: | |  |  |  |  |  |  |  |  |  |
| Head Office Location: | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Site Manager: | |  |  |  |  |  |  |  |  |  |
| Telephone: |  |  |  | Email: |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Nature of Business: | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Number of Employees: | |  |  |  | Male |  | Female |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Category of Workers: | |  |  |  |  |  |  |  |  |  |
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| Personal Protective Equipment Provided: | | | |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |
| Hours of Work: | |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |
| **The following documents in accordance with your established operational procedures must be attached** | | | | | | | | |  |  |
| **to the completed application form where applicable:** | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Covid-19 Response Plan;** | | |  |  |  |  |  |  |  |  |
| **Floor Plans, Ventilation System, OSH Policy / Plans;** | | | | |  |  |  |  |  |  |
| **Other relevant documents.** | | |  |  |  |  |  |  |  |  |
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| I confirm that measures are in place as per attached appendices. | | | | | |  |  |  |  |  |
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| Applicant's Name & Signature: ……………………………………………………………………………………………………………. | | | | | | | | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| The completed application form and queries should be emailed to: labourdepartmentslu@gmail.com & | | | | | | | | |  |  |
| ps.infrastructure@govt.lc | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| For additional information, please contact 460-0808, 720-1832 | | | | | |  |  |  |  |  |
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