	F 4.15.1 **Check List** **COMPANY QUALIFICATION**	Rev. of 21 October 2025

PURPOSE:

- Comply with the requirements of the TUSSL**, Legislative Decree 81/08, Articles 26 and 97**, in order to verify the technical and professional suitability of contractors, subcontractors, and self-employed workers entrusted with works, services, or supplies at the USAF Base in Aviano, whether through a formal contract or direct assignment managed via GPC (Government Purchase Card).

SCOPE OF APPLICATION:

- This Checklist must be used and verified for **each CONTRACT, meaning the assignment of works** (construction, services, supplies, repairs, maintenance, etc.).
- This Checklist must be used and verified for **each COMPANY or CONTRACTOR** involved in the assignment of works: **Main Contractor (Awarded Company), Executing Companies, and Self-Employed Workers** operating under subcontracting arrangements. On construction sites, in the case of subcontracting, the employer of the awarded company must verify the technical and professional suitability of subcontractors using the same criteria outlined herein, pursuant to Annex XVII, paragraph 3 of Legislative Decree 81/2008 (TUSSL).

DEFINITIONS:

- **Client:** The entity on whose behalf the work is carried out and who holds decision-making and financial authority. The client may appoint a project manager to act on their behalf.
- **Main Contractor (Awarded Company):** The company holding the contract with the Client. To carry out the work or service, it may use subcontractors or self-employed workers, and in both cases, it is required to verify the safety conditions of the assigned work, including Technical and Professional Suitability (Annex XVII of Legislative Decree 81/08).
- **Executing Company:** The company that directly performs the work or part of it, using its own personnel and resources. It may coincide with a subcontractor.
- **Subcontractor:** The company to which the Main Contractor assigns the execution of the work or part of it, using its own personnel and resources.

INSTRUCTIONS:

- This Checklist is **to be used by the CLIENT** (USAF Base, i.e., the Contracting Office or the section requesting the work/service).
- The form consists of two parts:
  - **Points 1, 2, and 3:** Must always be verified for each company during the selection phase, in order to assess technical and professional suitability. This verification is a **prerequisite for selecting awarded companies** and ensures they are qualified and compliant with all legal requirements.
  - **Points 4, 5, and 6:** Must be verified after the companies have been selected and the work has been assigned, which may occur several months later. The items listed under point 5 apply exclusively to construction work.
- The supporting documentation required in this Checklist must be attached and stored together with the Contract. Where not applicable, such as in the case of direct assignment via GPC, it must be attached to the Squadron's work assignment request.

Notes on Supporting Documentation:

- Compressed files (.zip, .rar, etc.) are blocked by the system.
- For files larger than 15MB, use the secure file transfer portal: https://safe.apps.mil

For clarification:
31 FW/CCPP, Prevention and Protection Office [Safety and Occupational Health – FN requirements, D.Lgs 81/08]

Email: 31FW.CCPP.DUVRI@us.af.mil
Comm. +39 0434 307722
Hours: Mon-Fri 8.30-12.30/13.30 -17.30
Aviano Air Base, Bldg. 1472

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Project / Job / Service			
Client *[SQ/Section]*			
Work Assignment Method	☐ **Y –** Contract (PWS, BPA,...) ☐ **Z – CBR, direct assignement by SQs** (GPC payment)		
Area/building subject to the works			
Compiler Full Name		**Completion Date**	

1.	**COMPANY / SELF-EMPLOYED WORKER INFORMATION** [Main contractor, executing companies, sub-contractors]
Note: Identify the main contractor, holder of the contract. All companies involved, including those identified after the contract has been awarded, must be qualified—i.e., technically and professionally suitable—by verifying each applicable item in this checklist.	
☐	Full Company details / Ragione Sociale Completa [indicare se ☐ impresa, ☐ impresa individuale, ☐ lavoratore autonomo]
☐	VAT / C.F. e P.IVA
☐	Address / Indirizzo sede legale
☐	Phone / Recapito Telefonico Aziendale
☐	Company e-mail / E-mail Aziendale

2.	**COMPANY CONTACTS FOR OCCUPATIONAL SAFETY** [Main contractor, executing companies, sub-contractors]
☐	Employer / DDL - Datore di lavoro *[full name, tel., e-mail]*
☐	Safety Manager / RSPP - Responsabile Servizio Prevenzione e Protezione *[full name, tel., e-mail]*

3.	**REQUIRED DOCUMENTATION TO BE ATTACHED TO THE CONTRACT** [from Main contractor]
☐	Self-declaration IAW art. 47 DPR 445/2000, technical and professional suitability**, complete with attachments requested therein** – **F. 4.15.2**

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TO BE COMPLETED AFTER THE AWARDING OF THE WORKS OR ASSIGNMENT OF THE SERVICE

Compiler Full Name		**Completion date**	

4.	**REQUIRED DOCUMENTATION FOR CONTRACTOR PERSONNEL ENTERING THE INSTALLATION** [Main contractor, executing companies, sub-contractors]
☐	Complete list of employed workers, including details of training and medical fitness for each individual
☐	Copy of each worker's Identity Document and Fiscal Code (codice fiscale)
☐	Copy of Residence Permit
☐	UNILAV employment notification

5.	**REQUIRED DOCUMENTATION** [Main contractor, executing companies, sub-contractors] **REQUEST ONLY FOR CONSTRUCTION SITES Titolo IV TUSSL 81/08**
☐	**Operational Safety Plan / Piano Operativo Di Sicurezza (POS)** of **each company** involved in the work
☐	Designate a **Person who is Responsible of overseeing and supervise Works on** behalf of the Client
For works assigned and carried out, even non-simultaneously, by **multiple Executing Companies** and/or self-employed workers, the Client is also required to:	
☐	Designate the **SAFCOR** / **Coordinatore per la Sicurezza (CSP e CSE),** e comuniacare nominativo alle Ditte coinvolte
☐	Receive Coordination Safety Plan / **Piano di Sicurezza e Coordinamento (PSC)**, [by SAFCOR]

6.	**PRE-PERFORMANCE** [at least within 25 days from the start of the works]
☐	Contact the Prevention and Protection Office 31FW/CCPP - **31FW.CCPP.DUVRI@us.af.mil**
☐	Contact the Safety Ground Office 31 FW/SEG - **31FW.SEG@us.af.mil**