

Visitor Sign In

Log visitor details, host, arrival time and any site briefings given. Keep a live record of who is on site at any time.

Title: _____

Severity: _____ Site: _____

Date / Time: _____ Completed by: _____

Visitor Information

1 Visitor name *

2 Company or organisation

3 Contact number

4 Email address

5 Vehicle registration (if applicable)

Visit Details

6 Date of visit *

7 Time of arrival *

8 Person being visited *

9 Purpose of visit *

Meeting

Delivery

Contractor work

Inspection / Audit

Interview

Other

10 Expected duration

Under 1 hour

1 to 4 hours

Full day

Multiple days

Health and Safety

11 Have you read and understood the site safety rules? *

Yes

No

N/A

12 Do you have any medical conditions we should be aware of in an emergency?

Yes

No

N/A

13 If yes, please provide details

14 Are you bringing any hazardous materials or equipment on site?

Yes

No

N/A

15 If yes, please provide details

Identification and Access

16 Photo ID provided

Yes

No

N/A

17 ID type

Driving licence

Passport

Company ID

Other

18 Badge or pass number issued

Emergency Contact

19 Emergency contact name

20 Emergency contact number

Sign-in

21 Visitor signature *

Signature

22 Photo of visitor

Attach file here

Sign-out

23 Time of departure

24 Badge or pass returned

Yes

No

N/A