

		<h1 style="text-align: center;">CONTRACT EMPLOYEE INFORMATION</h1>					
SECTION 1 - REQUIRED FIELDS	PERSONAL INFORMATION	Company Name:		Alberta WCB#:		G.S.T./BN#:	
		Last Name:		First Name:		Date of Birth (MMM, DD, YYYY):	
		Address:		City:		Province:	Postal Code:
		Telephone:		Cell Phone:		Trade/Certification:	
		Email:					
	Emergency Contact Name: _____ Emergency Contact Phone Number: _____						
	NOTES						
Employment Equity Questions		Employment Equity Questions (Information collected is voluntary and confidential. It is used for employment equity purposes only)					
		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other _____				Are you an Aboriginal Person? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Payroll Information		Position: _____ Date of Hire: _____ Hourly Rate: _____ Flat Rate: _____					
Change		Rate Change: _____ Rate Change Date: _____					
Signatures		Department Supervisor/Manager				Date	
		Nelson Martin				Date	
Routing		Package to Payroll _____ <div style="display: flex; justify-content: flex-end;"> Payroll Initials _____ Date _____ </div>					

Privacy policy: We respect our employee's rights to personal privacy. This information will only be used for the purpose of maintaining employee and payroll records and will not be shared with any outside parties. To prevent unauthorized access, maintain data accuracy, and ensure the correct use of information, we have put in place appropriate physical, electronic, and managerial procedures to safeguard and secure the information contained in this document.

MCSWEEN CUSTOM FABRICATING

159-55202 SH825 Sturgeon Industrial Park, Sturgeon County, Alberta T8L 5C1 Canada
Phone: 780-998-0600 Fax: 780-992-0600 www.mcsweenfab.com

WORKER INDOCTRINATION

NAME:	
POSITION/TRADE:	PLANT LOCATION:

POINTS COVERED	INITIAL	POINTS COVERED	INITIAL
Welcome to McSween		Permit Procedure	
Safety Program		Drug & Alcohol Policy	
Safety Responsibilities		Housekeeping Requirements	
Emergency Response & Evacuation		Disposal of Waste	
Reporting of Accidents		Location of Lunch/Meeting Room	
Reporting of Near Miss		Hours of Work / Breaks	
Location of Medical Center		Operation of Vehicles and Equipment	
Tool Box Safety Meetings		Defective Tools and Equipment	
Personal Protective Equipment		Site Security	
Right to Refuse, Know, Participate		Review Area Hazards	
WHIMIS Controls		Familiarization Tour	
Modified Work Program		New Hire Forms/Void Cheque	
Fit for Duty		Coverall, Lock and Training Policies	

SAFETY TRAINING

COURSE	EXP DATE	COURSE	EXP DATE
First Aid / CPR <input type="checkbox"/>		WHIMIS 2015 <input type="checkbox"/>	
CSTS/PST <input type="checkbox"/>		Confined Space <input type="checkbox"/>	
SCBA <input type="checkbox"/>		Fit Test (Half Mask) <input type="checkbox"/>	
H2S Alive <input type="checkbox"/>		Full Face Mask <input type="checkbox"/>	
Fall Arrest <input type="checkbox"/>		Fire Extinguisher <input type="checkbox"/>	
Forklift Training <input type="checkbox"/>		Aerial/Man lift <input type="checkbox"/>	

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Do you have any medical conditions we should be aware of? If yes, give details:	Y	N
Are you currently taking any medication? If yes, give details:	Y	N
Have you been on W.C.B. in the last 12 months? If yes, give details:	Y	N
Do you have physical limitations we should be aware of? If yes, give details:	Y	N
Are you afraid of heights or confined spaces? If yes, give details:	Y	N
Do you have a valid driver's license? Driver License #: _____ Class: _____	Y	N

The above-named worker has received and understands the requirements on the identified points.

Orientated by: _____ Worker: _____ Date: _____

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DIRECT DEPOSIT AUTHORIZATION

Employee Name: _____

Please circle A or B:

(Direct deposit is a mandatory employment condition)

- A) My direct deposit information has **NOT** changed
- B) My direct deposit information is below

E-Mail Address: _____

PLEASE ATTACH A VOID CHEQUE OR DEPOSIT SLIP
FROM YOUR BANK HERE
****PLEASE NOTE: WE DO NOT ACCEPT HANDWRITTEN BANKING INFO****

Signature _____

Date _____

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SAFETY/GENERAL RULES

- The following rules outline some basic requirements for all McSween Custom Fabricating worksites. These rules and enforcement will be reviewed on all orientations
- The use of alcohol or illegal drugs while on company business will NOT be tolerated and will lead to dismissal.
- The following personal protective equipment requirements shall be adhered to:
 - CSA approved hard hats, CSA approved safety glasses with side shields and CSA approved safety footwear are the minimum personal protective equipment, which must be worn in the proper manner on client worksites.
 - CSA approved safety footwear, CSA approved safety glasses with side shields are required in all company shops and yards.
 - CSA approved hearing protection will be worn in all areas with noise levels more than 85dBa or as specified by client regulations.
 - Clean protective clothing suitable to the job being done and weather conditions must be worn. (No tank tops or summer shorts). Long sleeve shirts and pants must be worn at all times.
 - Other special safety equipment or clothing requirements, as determined by the job hazards or client regulations will be worn.
- Accidents, injuries or “near misses”, regardless of their nature, shall be promptly reported to supervisors.
- Personnel may not operate or use any equipment/ tools without the proper training
- Smoking is permitted only in designated areas.
- Riding on equipment is prohibited. No person shall ride any hook, hoist or other material handling equipment, which is used strictly for handling material and not specifically designed to carry riders.
- Appropriate government regulations will be adhered to when performing any work.
- Company vehicles / equipment will be operated as per posted speed limits, regulations, and operating manuals. Seat belts must be worn at all times. Always walk around the vehicle / equipment before operations. Each individual will be responsible to drive according to the rules of the traffic act.
- If vehicle is being misused or damages occur under the care of the employee, driving privileges will be revoked.
- Horseplay, fighting, gambling or possession of firearms are strictly forbidden on the job and constitute grounds for dismissal.
- Running is not permitted anywhere, except in the case of extreme emergency.
- Personal Cell phones, portable stereos, I-Pods, etc. are prohibited in the McSween offices, workshops /on client processing areas or as specified by client regulations. Exceptions are for company designated personnel such as Supervisors, Foreman, Project Managers, etc., when phones are used for client communications

I have read and understand the rules outlined above and acknowledge I will follow & adhere to these rules.

Print Name: _____

Date: _____

Signature: _____

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INTRODUCING MCSWEEN LIFE SAVING RULES

The 10 life-saving rules help us manage the risks associated with the work we do every day. The rules are designed to prevent injuries and significant incidents at our operations and across our industry. We provide support materials to our staff and outline accountabilities for leaders to verify the rules are being followed as we conduct our work. The 10 life-saving rules are:



CONFINED
SPACE



WORKING AT
HEIGHT



WORK
AUTHORIZATION



ENERGY
ISOLATION



LINE OF FIRE



BYPASSING
SAFETY
CONTROLS



DRIVING



HOT WORK



SAFE
MECHANICAL
LIFTING



FIT FOR DUTY

Compliance with the Life Saving Rules are a condition of employment within McSween Custom Fabricating and must be followed at all times.

The new rules align with our shared goal of **zero injuries and zero incidents**

The new rules are clear and concise and have the potential to save lives and reduce inefficiencies

I have read and understand the rules outlined above and acknowledge I will follow & adhere to these rules.

PRINT NAME: _____ DATE: _____

SIGNATURE: _____

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EMPLOYEES / CONTRACT EMPLOYEES

Coverall Policy (Reference 3.5)

All field personnel are required to wear FR (Fire Resistant) coveralls at all plant sites unless otherwise specified. McSween Custom Fabricating will provide coveralls for the cost of \$110.00. The \$110.00 fee will be deducted from your first paycheck with the signed payroll authorization deduction form. McSween Custom Fabricating will not be responsible for lost or stolen coveralls.

NOTE: Coveralls must be returned to Coverall room (162-55202 SH825) with a completed form for reimbursement.

Winter Parka Policy (Reference 3.5.1)

All field personnel are required to wear FR (Fire Resistant) winter parkas at all plant sites unless otherwise specified. McSween Custom Fabricating will provide winter parkas for the cost of \$200.00 per pair. The \$200.00 fee will be deducted from your first paycheck with the signed payroll authorization deduction form. McSween Custom Fabricating will not be responsible for lost or stolen parkas.

NOTE: Parkas must be returned to Coverall room (162-55202 SH825) with a completed form for reimbursement.

Training Policy (Reference 3.6.1)

The minimum safety ticket requirements for all McSween Custom Fabricating personnel are WHIMIS 2015, CSTS, Fall Protection and Confined Space. McSween Custom Fabricating will reimburse employees for additional training under the following conditions:

- Course must be approved in writing by Management
- Employee must pass the course

Payroll deduction can be arranged for course payment with Management approval with signed payroll deduction authorization form. Employee's wages and cost of course will be paid if the employee has worked over 300 man-hours. Foreman will be paid at Journeyman rate.

If employee has not worked the 300hrs employees must pay for the course by payroll deduction and meet the above conditions and will not be paid for the day in the course. A permanent ticket will be issued by the certifying body.

Contract employees will be deducted for training off the next payroll invoice period and wages are not paid for the day in the course.

Locks (Reference 3.6.1)

Employees needing locks sign one out from McSween Custom Fabricating. If the lock is not returned you will be charged a fee of \$25.00. The \$25.00 fee will be deducted from your last paycheck.

I _____, have read and understand the policies outlined above, by signing I give authorization for McSween to take the above deductions off my pay.

Signature: _____

Date: _____

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EMPLOYEE PAYROLL DEDUCTION AUTHORIZATION FORM

First & Last Name: _____

Circle one:

Subcontractor / Employee

Deduction Effective Date: _____

Payroll Deductions:

- ☐ Coveralls - \$110.00 pair Size _____
- ☐ Winter Parka- \$200.00 pair Size _____
- ☐ Lock- \$25.00 each Lock # _____
- ☐ Training - \$ _____ Course _____

I agree that my gross pay will be reduced by the amount of my deduction as checked and indicated above. In the event of a deduction change during the year, my employer is authorized to deduct the new amount from my pay. If employed under 300 hours, you will be reimbursed after a total of 300 hours worked. All Subcontractors will be charged and not reimbursed.

Subcontractor / Employee Signature

Date

Payroll Signature

Date

Pay Period: _____

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January 1, 2024

ATTENTION: ALL CONTRACT EMPLOYEES

1) General Liability & Commercial Automobile Liability Insurance.

- As a contract employee working for McSween Custom Fabricating, you are required to provide a certificate of insurance. Rig Welders are required to provide a copy of Commercial Automobile liability Insurance at a minimum of \$5,000.000, Vehicle Registration and Driver's License. We require 15 days' notice prior to change or cancellation of policy.

2) Certificate of Incorporation

- We require a copy of your certificate of incorporation for our files.

3) Valid WCB Coverage

- Please provide WCB number and Clearance Letter

Please submit these as soon as possible. You can email them to Human Resources (hr@mcsweenfab.com)

If these documents are not provided within 72 hours of first shift worked, McSween Custom Fabricating reserves the right to pay worker at the employee rate with the necessary statutory deductions withheld. Please acknowledge by signing below.

During the term of your employment with McSween Custom Fabricating as a Sub Contractor your Insurance and WCB must remain valid. This information is monitored by payroll, if at any point either one becomes invalid you will be paid as an employee for the next payroll run or until you update your information.

If you require any additional information, please contact Human Resources (hr@mcsweenfab.com).

Regards,

McSween Custom Fabricating

Contract Employee

Date

Company Name

MCSWEEN FAB - SAMPLE INVOICE

CO/TRADE NAME: ABC WELDING
PERSONAL NAME: JOHN DOE

INVOICE NO: 12345
INVOICE DATE: MMM/DD/YYYY

ADDRESS: 12345 YOUR PLACE
EDMONTON, AB
T8L 1W2

PAY PERIOD DATES:MMM/DD/YYYY to MMM/DD/YYYY

WCB NO: SHOULD BE 7 DIGITS.

PHONE NO: 780-123-1234

GST./B.N.: 12345 6789 RT0001

DAY	DATE	JOB SITE	HOURS REG.	ST. RATE	HOURS O.T	O.T. HOURS	SHIFT DIF (\$2 PER HR)		
				X 1		X 1.38			
SAT	13-Sep					\$ -			
SUN	14-Sep					\$ -			
MON	15-Sep	SHERRITT	8.00	\$ 20.00	4.00	\$ 27.60			
TUE	16-Sep	AGRIUM (NIGHTS)	8.00	\$ 20.00	4.00	\$ 27.60	12.00		
WED	17-Sep	INLAND	8.00	\$ 20.00	4.00	\$ 27.60			
THU	18-Sep	AGRIUM (NIGHTS)	8.00	\$ 20.00	4.00	\$ 27.60	12.00		
FRI	19-Sep	BUNGE	8.00	\$ 20.00	4.00	\$ 27.60			
SAT	20-Sep					\$ -			
SUN	21-Sep					\$ -			
MON	22-Sep	SHERRITT	8.00	\$ 20.00	4.00	\$ 27.60			
TUE	23-Sep	SHERRITT	8.00	\$ 20.00	4.00	\$ 27.60			
WED	24-Sep	SHERRITT	8.00	\$ 20.00	4.00	\$ 27.60			
THU	25-Sep	INLAND	8.00	\$ 20.00	4.00	\$ 27.60			
FRI	26-Sep	INLAND	8.00	\$ 20.00	4.00	\$ 27.60			
TOTAL	HOURS		80.00		40.00		24.00		
	RATE		\$ 20.00		\$ 27.60		\$ 2.00		
	TOTAL \$		\$ 1,600.00		\$ 1,104.00		\$ 48.00	SUBTOTAL	\$ 2,752.00
								G.S.T 5%	\$ 137.60
								TOTAL INV.	\$ 2,889.60

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January 1, 2024

INVOICES

ATTENTION: ALL CONTRACT EMPLOYEES

Enclosed is a sample invoice which we need all subcontractors to follow. The format is such that all information required to process your payment is on the front of the invoice.

If your invoice is not written out properly, McSween will return it to you which may result in a delay of your payment until the next payment run.

Overtime calculated at 1.38 multiplier rate is applicable for all trades (EXCEPT RIG WELDERS). For any work in excess of regular hours per day, Monday to Friday based on 40 hours/week. Any work Saturdays and Sundays.

Shift Differential of \$2.00/HR extra is applicable for all trades and is overtime exempt, (Field only).

For shifts that commence between 3:00 p.m. and 6:00 a.m. if applicable. Do NOT add \$2.00/HR to your rate as it is based on total hours per pay day, regardless of whether the time was Regular time or Overtime.

All hours must match timecards. If there is a discrepancy, your invoice will be adjusted to match the timecard hours. If you notice an error in timecard hours, please notify your supervisor immediately to get it corrected.

Please note that our bi-weekly pay period ending date is on a Friday, as per the attached list, all invoices must include a copy of your Liability insurance attached and must be submitted by Monday at noon to be processed on time. If you are emailing your invoice, please send it to payroll@mcsweenfab.com.

All contract employees must have a valid WCB account and Insurance in good standing. Clearances are requested every pay period and your account must be valid and in force from the first day you work. Any subcontractor without a valid account will be deducted \$3.00/hr. on the hourly rate regardless of Reg/OT.

If you require an electronic copy of the template or have any questions, please contact payroll at payroll@mcsweenfab.com or 780-998-0600 Ext. 103.

Regards,

McSween Custom Fabricating

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Pay Period	Cut Off Date	Invoices Due By	Payment Date
PP1	Friday, December 29, 2023	Monday, January 1, 2024	Friday, January 5, 2024
PP2	Friday, January 12, 2024	Monday, January 15, 2024	Friday, January 19, 2024
PP3	Friday, January 26, 2024	Monday, January 29, 2024	Friday, February 2, 2024
PP4	Friday, February 9, 2024	Monday, February 12, 2024	Friday, February 16, 2024
PP5	Friday, February 23, 2024	Monday, February 26, 2024	Friday, March 1, 2024
PP6	Friday, March 8, 2024	Monday, March 11, 2024	Friday, March 15, 2024
PP7	Friday, March 22, 2024	Monday, March 25, 2024	Thursday, March 28, 2024
PP8	Friday, April 5, 2024	Monday, April 8, 2024	Friday, April 12, 2024
PP9	Friday, April 19, 2024	Monday, April 22, 2024	Friday, April 26, 2024
PP10	Friday, May 3, 2024	Monday, May 6, 2024	Friday, May 10, 2024
PP11	Friday, May 17, 2024	Monday, May 20, 2024	Friday, May 24, 2024
PP12	Friday, May 31, 2024	Monday, June 3, 2024	Friday, June 7, 2024
PP13	Friday, June 14, 2024	Monday, June 17, 2024	Friday, June 21, 2024
PP14	Friday, June 28, 2024	Monday, July 1, 2024	Friday, July 5, 2024
PP15	Friday, July 12, 2024	Monday, July 15, 2024	Friday, July 19, 2024
PP16	Friday, July 26, 2024	Monday, July 29, 2024	Friday, August 2, 2024
PP17	Friday, August 9, 2024	Monday, August 12, 2024	Friday, August 16, 2024
PP18	Friday, August 23, 2024	Monday, August 26, 2024	Friday, August 30, 2024
PP19	Friday, September 6, 2024	Monday, September 9, 2024	Friday, September 13, 2024
PP20	Friday, September 20, 2024	Monday, September 23, 2024	Friday, September 27, 2024
PP21	Friday, October 4, 2024	Monday, October 7, 2024	Friday, October 11, 2024
PP22	Friday, October 18, 2024	Monday, October 21, 2024	Friday, October 25, 2024
PP23	Friday, November 1, 2024	Monday, November 4, 2024	Friday, November 8, 2024
PP24	Friday, November 15, 2024	Monday, November 18, 2024	Friday, November 22, 2024
PP25	Friday, November 29, 2024	Monday, December 2, 2024	Friday, December 6, 2024
PP26	Friday, December 13, 2024	Monday, December 16, 2024	Friday, December 20, 2024

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MANDATORY TOOL LIST – RIG WELDER -2024

MINIMUM 300 AMP WELDER. 200 FT OF LEAD, GROUND & REMOTE CONTROL OXYACETYLENE BOTTLES
COMPLETE OXYACETYLENE OUTFIT WITH 150 FT. HOSE, ROSEBUD FLASHBACK ARRESTORS ON BOTTLES & TORCHES. MUST CARRY OXY & ACETYLENE BOTTLES ON TRUCKS AT ALL TIMES.
2 FIRE EXTINGUISHERS MINIMUM 10 LBS.
12 INCH AND 24 INCH SQUARES
9 INCH AND 24 INCH LEVELS
4 PIPE STANDS MINIMUM
4 PIPE ROLLERS FOR STANDS
PIPE FAB SPINNER FOR BACK OF TRUCK
FLANGE LEVELING PINS
COMBINATION WRENCHES 3/8 - 1 1/4 INCH 2 SETS PIPE WRENCHES TO 18"
12 INCH & 18 INCH CRESCENT WRENCHES
1/2 INCH SOCKET SET
HAMMERS - BALL-PEEN, SLEDGE, CHIPPING SCREWDRIVERS
PIN BARS
ALLAN WRENCHES
C CLAMPS - CHANNEL GRIPS CHAIN GRIPS
TAPE MEASURES 16 FT. - 50 FT. OR EQUIVALENT FACE SHIELD - GOGGLES
GLOVES
ALL REQUIRED LENSES AND COVER PLATES CUTTING GOGGLES - HELMET
TIP CLEANERS
GRINDERS, ALL WITH PROPER FACTORY GUARDS-NO LOCKING TRIGGERS FILES - WIRE BRUSHES, ETC.
ROD OVEN
3/4 TON COME-A-LONG
1/2 INCH ELECTRIC DRILL WITH DRILL BITS AC-DC INDUSTRY APPROVED SAFETY HARNESS & LANYARD PROPANE BOTTLE WITH TIGER TORCH FOR PREHEAT HARD HAT WELDING HELMET COMBO
WELDING AND SAFETY TICKETS ON HAND
SUGGESTED EQUIPMENT – NOT MANDATORY
14 INCH CUT OFF SAW AC-DC BEVELERS TO 8 INCH PIPE
FAB TABLE WITH VISE AND CHAIN VISE
DIESEL SHUT OFF MAY BE REQUIRED AT SPECIFIC SITES

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MCSWEEN CUSTOM FABRICATING MILLWRIGHT TOOL LIST

SMALL TOOL BOX
SMALL DOLLY TO MOVE TOOLS AROUND
SCREWDRIVERS
TAPE MEASURE (METRIC AND IMPERIAL)
COMBINATION WRENCHES (3/8" TO 1 1/4")
SOCKET SET (UP TO 1 1/4")
ALLEN SET (METRIC AND IMPERIAL)
UTILITY KNIFE
FLASHLIGHT (HAND AND HEAD)
ASSORTED LEVELS (MACHINIST LEVEL)
PLIERS, NEEDLE NOSE
CALIPERS
COMBINATION SQUARE
MICROMETER
TIN SNIPS
BALL PEEN HAMMER (1 LB AND 2 LB)
CENTER PUNCH
PLUMB BOB
FEELER GAUGE
GASKET SCRAPER AND PUTTY KNIFE
MISC PLIERS
SMALL 18" PRY BAR
SCRIBE
CHISELS, (COLD) 1/4", 3/8", 1/2", 3/4"
VICE GRIPS
ADJUSTABLE WRENCH 6", 8", 12"
DRIFT PINS
SLEDGE HAMMER, 3-4 LB
DIVIDERS, 0-8"
DIAL INDICATOR
PLIERS, SNAP RING
SIDE CUTTERS