




**Frontline Security Services Limited**

# **Mobile Assignment Instructions**

**Site No. 360 /02**

**Authorised by;**

**Client:** \_\_\_\_\_ **(signed)**

**Frontline:**  **(signed)**

**Date: April 2018**

## 1.1 Record of Amendments

### Authorised Amendments

Amendments to these Assignment Instructions may only be authorised by the Managing Director following consultation with the Client.

All amendments to approved assignment instructions should be advised to Frontline Security Services Limited in writing or by e-mail.

Where a change has occurred, this status of the amended page will be shown in the Record of Amendments section of this document, in addition a Change to Assignment Instructions Form [SP 12 02](#) will be completed ,see **Appendix (H)**.

| Page No.   | Title of section | Brief details of amendment  | New Issue No. | Authorised by | Date     |
|------------|------------------|---|---------------|---------------|----------|
| All        | All              | Full review of all contents and implementation of new formatting throughout in compliance with the revised Quality Management System. | 2             | AOH           | 06.05.16 |
| Appendix B | Incident Report  | Insert Incident Report Issue 4  | 2             | AOH           | 20.03.17 |
| All        | All              | Change to Company Name  | 03            | AOH           | 01.04.18 |

| Copy No. | Holder               | Date       |
|----------|----------------------|------------|
| 1        | Managing Director    | April 2018 |
| 2        | Office Administrator | April 2018 |
| 3        | Client               | April 2018 |
| 4        | Site                 |            |

## 2.1 General Information

**RESPONSE AND KEYHOLDER ATTENDANCE**

Client Name: **Beva Investments Limited**

Client Address:  
 Beva Investment Limited  
 Chichester Street  
 Rochdale  
 Oldham  
 OL16 2AE

Site Address:  
  
 Eclipse Centre  
 Buckley Road  
 Rochdale  
 OL12 9DL

Telephone Number: 01706 710740

Telephone Number: 01706 714455

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Issue date: 1<sup>st</sup> April 2018

Next Review date: April 2019

### Emergency Contacts

| Contact Type    | Name | Contact Number |
|-----------------|------|----------------|
| Beva Control    |      | 01706 667762   |
| Account Manager |      |                |

### Authorised Amendments

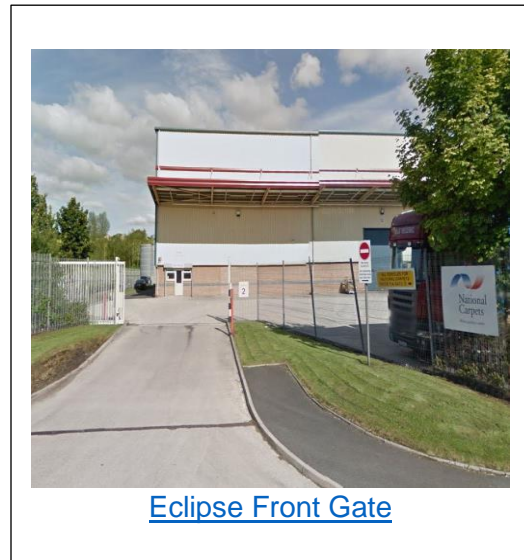
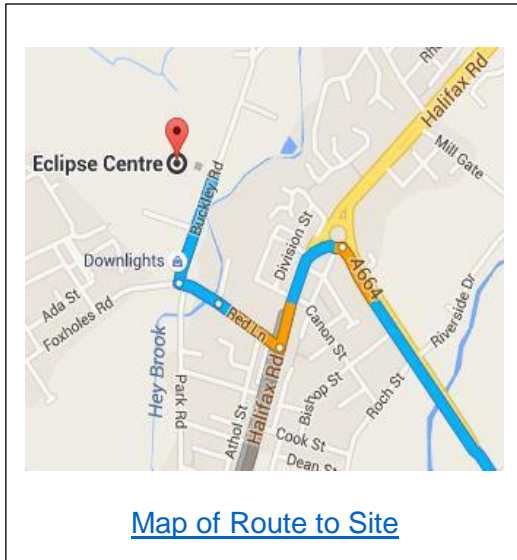
Amendments to these Assignment Instructions may only be authorised by the Managing Director following consultation with the Client.

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### 3.1 Site Details

#### Site Map / Location



#### Directions to site

From the Acorn Centre up Shaw Road through Shaw to Milnrow Road,

Continue on Milnrow Road to traffic lights at Albert Royds Street turn right into Albert Royds Street.

Continue to roundabout turn left at roundabout and take second right into Red Lane and second right into Buckley Road

Drive past Buckley Road Industrial Estate and the Eclipse Centre is on left (National Carpets).

#### Site Plan(s)

See Appendix (A) for Alarm Zones / Full Site Plans

#### Keys Issued by Client

| Key Type         | ID Number | Application            | Returned to client |
|------------------|-----------|------------------------|--------------------|
| Standard Padlock | AB2       | Pedestrian Access Gate |                    |

## 4.1 Site Instructions

### Alarms

|                   |     |
|-------------------|-----|
| Alarm Access Code | N/A |
| Alarm Password    | N/A |

### Hours Covered

|                      |             |
|----------------------|-------------|
| Monday – Friday      | 1900 – 0700 |
| Saturday and Sunday  | 24hours     |
| Public Holiday Cover | 24 hours    |

### Instruction upon call out

- Respond to call and attend site.
- Make contact with the Beva Control on 01706 667 762
- Act upon the information or directions provided by the Beva Control, who can view some of the site remotely by CCTV.
- Maintain communication with Beva Control whilst you are on site and report your findings.

### Equipment

Beva provides chain and padlocks should they be required to secure their premises. Do not use this equipment for any other customer's property. Once Beva premises are secured using the provided equipment, stand down or await further instruction, Beva Staff will still be able to gain entry if required.

## 5.1 Dealing with and Reporting Incidents

An Incident Report Form [SP 12 09](#) Should be completed in relation to all incidents at the site and logged prior to you finishing your shift. See Appendix B

### Action in the event of Intruder Alarm / Break-In

Security Officers shall only attempt to apprehend an intruder(s) if safe to do so.

- The Police shall be informed immediately and requested to attend using the '999' Emergency services system.
- Provide the name and address of the Site, the exact nature of the incident and any other relevant information.
- Inform Beva and Frontline Security Services Limited Control of the situation.
- Whilst awaiting the arrival of the Police, endeavour to keep the intruder(s) under observation, recording all details such as description, vehicles registration numbers, location where last seen etc.
- Speak to the Police on their arrival to report the situation and accompany them on their investigation.
- Should an insecurity, break-in or damage be discovered, but no intruders found on site, the Police must still be informed and requested to attend.
- Control and the clients Emergency Contact shall be informed as soon as is practicable.

### Health and Safety

It is the Company policy that all company activities are carried out in conditions that ensure the safety, health and welfare of all persons affected by the company's activities.

The Company Policy is outlined in the Health and Safety Manual [SP 01 05](#) and the Health and Safety Statement and specific policies in relation to Office Based Working and Lone Working are outlined in [SP 12 04](#) .

The Company's commitment to Health, Safety and welfare must be met by the same commitment from all Company employees. Each employee must ensure that they themselves carry out their operation in a safe and secure manner, in line with the Company codes of practise, either current as included in the Health and Safety Policy Document or purpose drafted codes of practise.

It is Company policy that employees will not be asked to carry out duties unless they are:

- Trained to carry out that duty.
- Competent to carry out that duty

**Appendix A Site Plan and Alarm Zones**

**Appendix B – Incident Report Form**

|   |                  |   |                 |
|---|------------------|---|-----------------|
| <b>Client:</b>                                | <b>Site No.</b>  | <b>Assignment No.</b>                                 |                 |
| <b>Site Address</b>                           |                  | <b>Incident</b>                                       |                 |
|   |                  | Type of Incident: (Provide an overview or tick below) |                 |
|   |                  |   |                 |
|   |                  |   |                 |
| Date:   | Alarm Activation | <input type="checkbox"/>                              | Intruder        |
| Time (Time that you received the call)        | Insecurity       | <input type="checkbox"/>                              | Criminal Damage |
| Time on site:                  Time off site: | CCTV Response    | <input type="checkbox"/>                              | Theft           |
| Location of Incident:                         | Gate Closure     | <input type="checkbox"/>                              | Other           |

Officer completing the Report \_\_\_\_\_ (name)

How was the incident discovered: (Circle as appropriate)

|                  |               |           |        |       |
|------------------|---------------|-----------|--------|-------|
| Monitoring Strn. | FS Control Rm | On Patrol | Police | Other |
|------------------|---------------|-----------|--------|-------|

Were the Police called? Yes / No                  Time \_\_\_\_\_ Date \_\_\_\_\_

What time did the Police arrive on site? Time \_\_\_\_\_ Date \_\_\_\_\_

Police Officer (s) Name (s) & Collar Nos. \_\_\_\_\_ (FWIN) \_\_\_\_\_

At what time, did you inform control? Time \_\_\_\_\_ Date \_\_\_\_\_

Is there any loss or damage? Yes / No

Is the site vulnerable? Yes / No

(Outline any loss or damage and immediate action required to secure the site)





