

Notification of assignment on weekends, public holidays and nights by external companies (temporary)

Please fill in on PC or in PRINTED CAPITALS. If applicable, all information not marked „optional“ is mandatory. Only complete and legible applications can be processed. The applicant is solely responsible for the accuracy of the data.

Order placed by			
CHEMPARK partner			
Last name, first name (person responsible for order)			
Mobile number while the job is being carried out			
Job is carried out by			
Company, address			
Last name, first name contact person		Mobile number while the job is being carried out	
Details of the assignment			
CHEMPARK site ☐ DOR ☐ LEV ☐ UER			
Weekend and/or holiday work (time window 06:00 to 20:00)			
Days ☐ Sat ☐ Sun ☐ Holiday			
Date of first shift		Date of last shift	
Nighttime work (time window 20:00 to 06:00)			
Nights ☐ Mon/Tue ☐ Tue/Wed ☐ Wed/Thu ☐ Thu/Fri ☐ Fri/Sat ☐ Sat/Sun ☐ Sun/Mon			
Date of first shift		Date of last shift	
General job description of the employees of the above-mentioned external company mentioned in the following.			
Special features and remarks			
Destination plant/ building no.			

*The deputy of the person responsible for the order must belong to the same company as that person.



Registration no later than 1 working day before the start of the assignment by 2:00 p.m. Validity max. 1 week from first date of use. Access exclusively via Autohof (truck access gate).

Fill out this form completely, sign it, and email it scanned to:
werkschutz.servicecenter.lev@currenta.biz | werkschutz.servicecenter.dor@currenta.biz | werkschutz.servicecenter.uer@currenta.biz
 Detailed information on data protection is available at the gates or in the download area on chempark.de. [Continue](#)

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Names of the employees used by the external company named on page 1			
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included
Last name, first name		☐ CHEMPARK ID available	☐ Check-in-form included

☐ For additional employees see supplementary sheet

For the company carrying out the job

As the company's authorized representative, I affirm that I have the legally required permits. I am aware that for the entire duration of the assignment, the contact person of my company named on page 1 must be reachable at the mobile number named on page 1.

Date	Name in PRINTED CAPITALS	Signature
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For the ordering party at CHEMPARK

As the person responsible for the order of the company located at CHEMPARK, I confirm that I am aware of the details of the assignment. I (or my deputy) can be reached at the above mobile number while the job is being carried out.

Date	Name in PRINTED CAPITALS	Signature
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