

4TH YEAR PROJECT HAZARD ASSESSMENT FORM

Project Code: F-FF 286-2	Project Location: CUED Div-F Offices	
Assessor Name: Pholop Salmong	Assessor Email: pms67@ cam.ac.uk	
Supervisor Name: Dr. Fulvio Forni	Supervisor Email: J. forni Ceng. cam. ac. uk	
Brief Description of Project:	 	
Modelling, simulation, and control	design of an actuated bike.	
Hazard identification (the following examples are not an exhaustive list):		
Are there any hazards which are likely to be encountered during the project? YES NO (Tick box)		
If YES then please provide further details under the headings below.		
Electrical: (e.g electric shock, equipment operating at voltages >1000v, working on exposed circuits with voltages >50v etc) Smll D (motors below 80 Watts. Microcontrollers & Small electronics. Hazardous Substances: (e.g. harmful, toxic, flammable, sensitiser, carcinogenic, explosive, corrosive etc) Lipo Batteries (flammable, explosive) Gases: (e.g. asphyxiant, flammable, toxic, explosive, oxidising etc)		
Laser: (e.g. class of laser etc)		
Radiation: (e.g. ionising, non-ionising, electromagnetic fields, x-rays, ultraviolet (UV) etc)		
Robotic: (e.g. errors - human/control, mechanical failures, power systems etc)		
LEGO, Vex, Ardvino (potentially)		
Mechanical: (e.g. power tools, workshop machinery, powered lifting, etc)		
Workshop madrinery, 3D printing		
Biological: (e.g. biological hazards, genetically modified organisms (GMO) etc)		

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Physical: noise, vibration, high pressures, falling objects collapsing structures, s temperatures etc)	harp object	ts, high or low	
Other: (e.g. computer use, working at height, confined spaces, lone working, m falls, dust etc)	anual hand	lling, slips, trips and	
Computer use			
Identified risks should be discussed with your supervisor and a safe system of work agreed. A more in depth risk assessment may be required after initial review. Do not proceed until this form is signed off.			
For any safety queries contact the Department of Engineering, Safety Office on 01223 (3)32740 or 01223 (7)61455 or email safety-office@eng.cam.ac.uk , Room INO-18 (<i>Inglis Building Office Floor</i>).			
Signature of Student:	Date:	4/10/2018	
Signature of Supervisor:	Date:		
Signature of Safety Office:	Date:		

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