

Zero Harm Pre-Start Meeting Record

SECTION 1 – GENERAL DETAILS										
Pre-Start Meeting Conducted By: (Name)		Signature:	Date:	[]/[/ Time:					
Scope of Works for Shift:			·		· · ·					
Site/ Project: (including location)		Nearest Hospital:		First Aid Officers: (List)						
Site map completed? (see section 6)		Are all personnel author	rised to work on site?	Yes Do No						
SECTION 2 – SITE ACTIVITY HAZARD IDENTIFICATION										
A SWMS is only required if any of the risks below are identified. For activities not listed below, refer to a relevant work instruction to ensure work steps are understood. Stop Think Act Review Complete the STAR (Stop, Think, Act, Review) process to promote situational awareness.										
Critical Risks		High Risk Activ	ities		Environmental Risks					
Working in the vicinity of mobile plant/ moving vehicles Uncontrolled movements of vehicles or loads Working on/ near energised services/ HV/ LV electrical installations Stored energy Confined space entry Crane operation and lifting equipment People or objects falling >2m from height or to depth Excavation and trenching >1.5m Handling/ transporting hazardous substances & dangerous goods	Working near traffic corridor or near shi Asbestos removal/ Demolition of load I Work on/ near pres distribution mains of Artificial extremes of Contaminated or flat atmospheres Structural alteration support structures scaffolding Working near or over of drowning	disturbance bearing structures surised gas or piping of temperature ammable ns/ temporary including	Work on/ near chemical, fuel or refrigerant lines Work on/ near telecommunication towers Work in a tunnel or shaft Occupational diving Tilt-up/ precast concrete Use of explosives Working in isolation Hot work Hazardous manual handling	wa So Wo Ge Dis	orking near drains, and aterways bil erosion orking with hazardous liquids eneration of regulated waste sturbance of flora or fauna otential to start fire enerating excessive noise or dust forking near heritage sites osecurity/ weed spread					
Traffic Management Team Member Name	Qualification Type	Qualification Number	Signature		Traffic Scenario Card applicable to site					

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SECTION 3 – SHIFT ACTIVITIES		SECTION 4 – SITE SPECIFIC HAZARDS						
Item	Scheduled Activities to be Undertaken this Shift	Item	Site Specific Hazards Not Covered in SWMS e.g. Adverse weather conditions; high temperatures/ humidity, storms, or flood warnings, total fire ban days, interface with other work, site location.		conditions; high ity, storms, or flood	Controls		
1.		1.						
2.		2.						
3.		3.						
4.		4.						
SECTION 5 – SITE SPECIFIC REQUIREMENTS								
Item	Site Specific Requirements	Yes/ No/ N/A		/A	Notes			
1.	A current SWMS, signed and understood by all personnel, is available for all critical and high risk activities identified on the cover sheet?	Yes	No No	N/A				
2.	Required permits for critical or high risk activities have been permit completed (where applicable)?	Yes	No	□ N/A				
3.	New personnel and role changes have been communicated?	Yes	□ No	□ N/A				
4.	Hazards/ incidents/ reported since last shift have been communicated?	Yes	No	N/A				
5.	Suggestions/ good ideas from previous shift have been captured?	Yes	No	N/A				
6.	PPE requirements met by all Downer Workers?	Yes	□ No	□ N/A				
7.	Rail Specific. Has the Rail Safeworking pre-work brief been presented to personnel on site and all controls checked?	Yes	No	□ N/A				
8.	Critical risk controls have been checked and verified effective?	Yes	No	□ N/A				

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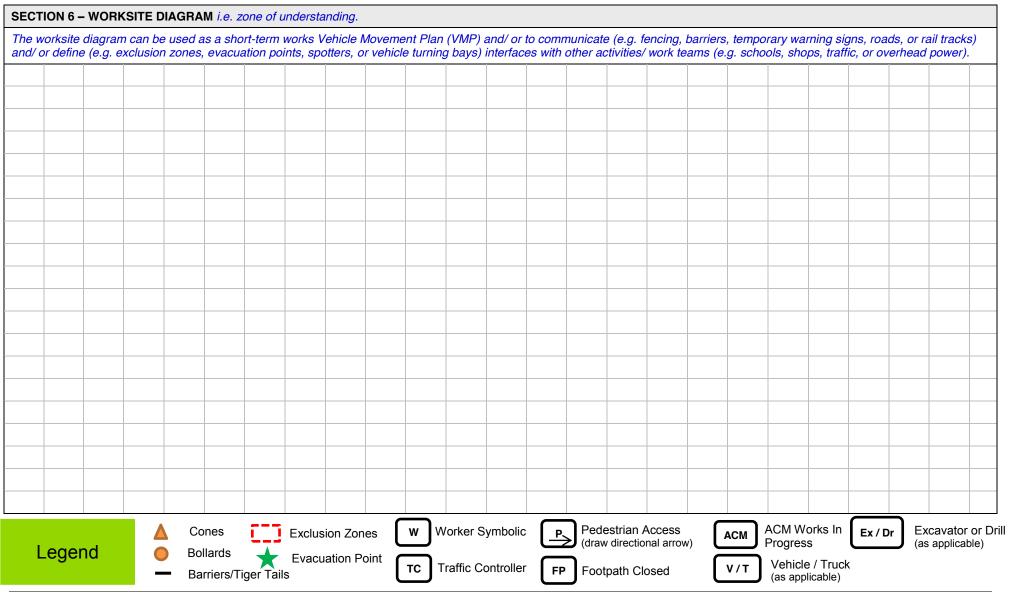
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SECTION 7 - PRE-START MEETING ATTENDEES

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By signing this pre-start meeting record, you are confirming that you are fit for duty, not adversely affected by fatigue and meet Downer's drug and alcohol policy requirements. Name Signature Name Signature Name Signature

Responsible Supervisor I confirm that the hazards, risks and controls associated with the activities scheduled for Declaration

today have been discussed with and are understood by the above attendees