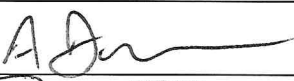


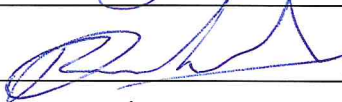

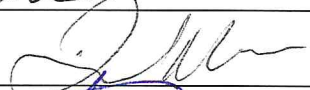
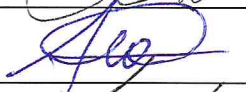
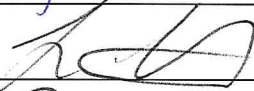






Area of Activity	Use of Vibrating Tool
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Ref No	RA018	Date	11/09/2023	Rev	1
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PLEASE READ THE NOTICE BELOW BEFORE SIGNING THIS FORM

I acknowledge that I have read and understood the Risk Assessment/s associated with this task/event/equipment etc.

Print Name	Signature	Date
A. Davison		30/09/23
SI COUPLAND		30-9-23
S. Lince		30-9-23
D. Richards		30-9-23
IONEL SOBREA		30.09.2023
DANIEL MANN		30/9/23
MILES ARKUS		30-9-23
L. BAKER		30-9-23
D. Bullock		30/9/23
P. Byrle		30/9/23
J. Paul		30/9/23
B. Mulholland		09/11/23