
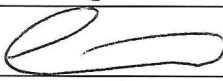









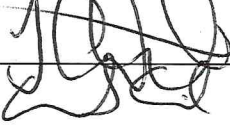
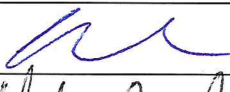

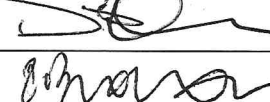





Area of Activity	Racking/Shelving and Mezzanine loading
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Ref No	RA002	Date	20/09/2023	Rev	1
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PLEASE READ THE NOTICE BELOW BEFORE SIGNING THIS FORM

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		30/9/23
SI COUPLAND		30-9-23
S. LINCE		30-9-23
D. RICHARDS		30-9-23
IONEZ SOBREA		30-09-2023
DANIEL MCCANN		30/9/23
MIKE ATKINS		30-9-23
L. BULLOCK		30-9-23
S RATCHIFF		30/09/23
M. DAVISON		30/09/23
L. Bullock		30/9/23
J. PAUL		30/9/23
L. HAMMOND		30/9/2021
L. PAYNE		30/9/2023
H. MEDCRAFT		30/9/2023
D. BULLOCK		30-9-23
I. BROWN		25.10.23
Brian Mulholland		09.10.23