

PRE-START SITE SPECIFIC HAZARD IDENTIFICATION CHECKLIST

PERSON(S) COMPLETING ASSESSMENT:				SALES ORDER	
OTHER CREW ON JOB:				NUMBER:	
BUILDER:				WORK TYPE:	
SITE ADDRESS/LOT:					
NO	Hazard Identification (If you circle the center Column the control measure applies)	TICK THE APPLICABLE RESPONSE			CONTROL MEASURES
1	Do you have your Climate Control Safety Pack (CCSP) & SWMS on site	YES	NO	NA	Arrange for a copy to be sent to site prior to commencement of works
2	Have all workers received induction training into the Climate Control Safety Pack (CCSP)	YES	NO	NA	Ensure training is complete prior to commencement of works
3	Have all workers under your supervision provided their Red/Yellow/White card details to Climate Control.	YES	NO	NA	Individuals can only work on site if they hold are a Construction Industry Card holder. If anyone doesn't have a Card, contact Employer for advice prior to commencing work
4	Has safe access been provided to site & to the areas that your workers will be working in.	YES	NO	NA	Notify your Employer/Site Manager to arrange safe access
5	Are there adequate facilities for waste materials & rubbish to be stored & secured i.e. Rubbish Cage / skip etc..	YES	NO	NA	Notify your Employer/Site Manager, place waste materials in a safe area on site that won't endanger others
6	Is there appropriate fall protection in place for you & your workers to commence works i.e. <ul style="list-style-type: none"> Quick stage scaffold system Stair Void Fall Protection, Hand Rails/Platform etc Mobile Scaffold, ladders etc.. (as per SWMS). 	YES	NO	NA	Do not commence work, notify you Employer/Site Manager to arrange fall protection immediately. Only commence work once Fall Protection has been installed.
7	Are weather conditions suitable for works to commence.	YES	NO	NA	Do not commence work until weather conditions are suitable. Contact employer.
9	Do all workers have appropriate Personal Protection Equipment (PPE) to complete the required works i.e. Work boots, Eye & Ear protection, UV protection etc... Are workers trained in its use.	YES	NO	NA	Supply workers with the appropriate PPE & train workers in its use before commencing works.
10	Are there other workers on site? <ul style="list-style-type: none"> Is there the potential for your work or their work to affect other workers health or safety 	YES	NO	NA	Discuss work plans to ensure works can proceed in a safe manner. Display warning signs if required i.e Warning Workers Working Above
11	Is there a risk of falling objects/material from work platform/scaffolds etc.. that could cause injury or damage	YES	NO	NA	Secure objects/materials from falling – if not possible do not work or load objects/materials above other workers.
12	Are you able to work in compliance with your generic SWMS	YES	NO	NA	Change work strategy or Amend your SWMS prior to commencing works so as compliance can be achieved
13	Are there any other site-specific risks or hazards that could affect any on site workers or the general public Health or Safety.	YES	NO	NA	Do no commence works unless controls can be implemented to eliminate or reduce the risks, consult your workers & list required controls in your SWMS, ensure all workers sign off accordingly.
14	Terms & Conditions: This document must be completed prior to commencement of any site works; this document must be attached to your invoice then forward to your Builder for payment. Persons signing below acknowledge they have complied with the requirements of the said terms and conditions				
DATE:		PERSON(S) COMPLETING ASSESSMENT:		Signature:	
Where uncontrollable "high risk" hazards exist, notify your Employer/Site Manager for advice. Note details on reverse of page					