Name:								
Employee No:								
Employee No.								
Declaration & Signature:								
I confirm the statements made within this assessment are my own work.								
Participant's Signature	Date							
Participant's Signature	Date							

Scenario:

A truck enters the rail corridor, on the down main side, to drop off ballast for the weekend possession at Arncliffe Station and is positioned as per the figure below. In this scenario, the truck is positioned outside the Danger Zone.



Send completed forms to:

assessment@transport.nsw.gov.au

Pre-work Briefing



Work Location:		Briefing Date: dd:mm:yy
Scope of work:	Site Supervisor:	Phone:
Emergency assembly point:	Briefer:	Briefer's signature:
First aid kit location:	First Aider:	SWMS/SWI Ref #:
Hazards (eg. Site specific hazards identified, including physical environment, human errors, plant and equipment)	Controls (to be implemented to eliminate or reduce the risk to the lowest practicable level)	Responsible for Control (either Sydney Trains or name of Contractor)

Pre-work Briefing cont.



	6		nazards	Amendmer briefing: hh:mm & Initial					
Participant Acknowledgement All incidents and injuries must be reported to the site supervisor (Line Manager) and the Safety Incident and Injury Hotline on 1800 772 779	supervisor (Line Manager) and the Safety Incident and Injury Hotline on 1800 772 779	NOTE: Persons are to question the Briefer if they don't understand any part of this briefing	s on site	Time of briefing: hh:mm					
			are free from the effects of alcohol/drugs/fatigue have been made aware of any hazardous materials/substances on site have been briefed on Safety Data Sheets (SDS) have been briefed on the site specific safety management plan have been briefed on the hazards of adjoining worksites/processes have been briefed on the results of today's site walk inspection and any new hazards identified and their controls as a result of this inspection	Signature					
			are free from the effects of alcohol/drugs/fatigue have been made aware of any hazardous materials/sub have been briefed on Safety Data Sheets (SDS) have been briefed on the site specific safety manageme have been briefed on the hazards of adjoining worksites have been briefed on the results of today's site walk insidentified and their controls as a result of this inspection	Name					
	pervisor (Lin	NOTE: Per	and/or induction ed) or the job	Amendment briefing: hh:mm & Initial					
		through those	ade licence and mit (if required) rk practice for th	Time of briefing: hh:mm					
	injuries must be reported	Briefer to tick each item below that is applicable and rule a line through thos that are not. All persons listed below acknowledge that they:	have been inducted to the site hold the applicable and current certificates of competency, trade licence and/or inc record eg. Construction Industry Induction wear the appropriate Personal Protective Equipment (PPE) have been informed of the requirements of the electrical permit (if required) have been briefed on the SWMS/SWIs/documented safe work practice for the job have been instructed in the controls recorded in this document and SWMS/SWIs	Signature					
	All incidents and	Briefer to tick each item below that is applicable that are not. All persons listed below acknowledge that they:	have been informed of the requirements of have been inducted to the site. hold the applicable and current certificates record eg. Construction Industry Induction wear the appropriate Personal Protective I have been informed of the requirements o law have been briefed on the SWMS/SWIs/do have been instructed in the controls record	Name					