|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Vessel Name:** |  | **Date:** |  | **Voyage #:** |  | **Port / Location:** |  |

**(**Port/Berth/Anchorage / ***if At Sea***: Lat & Long)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Condition**  **(Indicate ⌧)** | **Laden** | **Ballast** | **PREVAILING WEATHER CONDITIONS** | | | | | **NATURE OF TASK AT HAND**  **(Indicate ⌧)** | | **PPE**  **(Yes/No)** |
| **Draught** | **F** | **A** |  | **Direction.** | **Force** | **Height** | **Mb/ Inch** | **Enclosed Space Entry** |  |  |
|  |  |  | **Wind** |  |  | **\*\*\*\*\*\*\*\*\*** | **\*\*\*\*\*\*\*\*** | **Hot Work** |  |  |
|  |  |  | **Sea** |  | **\*\*\*\*\*\*\*\*\*\*** |  | **\*\*\*\*\*\*\*\*** | **Over side** |  |  |
|  |  |  | **Swell** |  | **\*\*\*\*\*\*\*\*\*\*** |  | **\*\*\*\*\*\*\*\*** | **Aloft** |  |  |
| **Estimated date & time of Task Commencement** | |  | **Barometer** | **\*\*\*\*\*\*\*\*\*\*** | **\*\*\*\*\*\*\*\*\*\*** | **\*\*\*\*\*\*\*\*\*** |  | **Engine Room** |  |  |
|  | |  |  |  |  |  |  |  |  |  |
| **Estimated date & time of Task Completion** | |  | **Tide / Current** |  |  | **Strength** | **Visibility** | **Other (pls specify):** |  |  |
|  | |  |  |  |  | **KN** |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Precise Location of Task:** | | | | |
| **Brief Description of Task:** | | | | |
| **Identity** | **Team Leader (Name & Rank):** | | | |
| **Personnel Assigned (Name & Rank):** | | 1) | 2) | 3) |
| 4) | | 5) | 6) | 7) |
| 8) | | 9) | 10) | 11) |

|  |  |  |  |  |  |  |  |
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| **Port Authority Notified**  **(if immobilizing )**  **(\*) when outside port/at sea** |  | **Take 5 &**  **Tool Box Observed**  **(Remarks)** |  | **LCD**  **Notified**  **(Remarks)** |  | **Emergency Equipment Tested & Ready** |  |
|  |  |  |  |  |  | **Communication Equipment Tested** |  |
|  |  |  |  |  |  | **Health & Safety Person Designated** |  |
|  |  |  |  |  |  | **Required Spares & Tools Available** |  |

|  |
| --- |
| **RESPECT SAFETY OF LIFE, Environment & PRoPERTY**  **Carefully read and comply with the comprehensive directives and guidelines contained in**  **“SMS VOlUME # IV JOB HAZARD ANALYSIS Procedures”** **"The Life You Save Is May be Your Own!"** |

|  |  |  |  |  |  |  |  |  |  |
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| **Step No.** | **Brief Description & Sequence of Task Steps To conduct the “Job”** | **Identify Hazard or Potential Incident** | **Describe Who or What may be harmed**  **(life, property, environment)** | **Severity Of**  **Hazard - Risk** | **Likelihood Of**  **Hazard - Risk** | **Risk Level (Using Risk Matrix)** | **Describe Control (Corrective) Measures** | **Residual Risk**  **(Select)** | **Action /**  **Responsible Party** |
|  |  |  |  | **Select [Severity]** | **Select [Likelihood]** |  |  |  |  |
| **1** |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |

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| --- | --- |
| **Overall Highest Residual Risk Grade** |  |

**Joint JHA is essential by C/O and 2/E when overlapping responsibilities and hazards are involved, approved by Chief Engineer and authorized by Master**

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| --- | --- | --- | --- | --- | --- | --- |
| Generated on Board or Ashore: | |  |  | Generated on Board or Ashore: | | |
| Chief Officer: |  |  |  | 2nd Engineer: |  |  |
|  | Name | Signature/ Date |  |  | Name | Signature/ Date |

|  |  |  |
| --- | --- | --- |
| Chief Engineer : |  |  |
|  | Name | Signature/ Date |

|  |  |  |
| --- | --- | --- |
| Master : |  |  |
|  | Name | Signature/ Date |

]

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Approved: | | |  | Approved: | |  |  | Approved (If applicable): | |  |
| By FM/SM |  |  |  | By D/GM |  |  |  | By GM |  |  |
|  | Name | Signature/ Date |  |  | Name | Signature/ Date |  |  | Name | Signature/ Date |

**\*\*\*\* Refer to Risk Matrix and Risk Category \*\*\*\***

**Instruction: Risk Matrix is for reference, there is no need to send this page to office.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **RISK MATRIX** | | | | | | | | |
| **Severity**  **Likelihood** | | | **Slightly harmful** | **Harmful** | **Extremely harmful** | The supervisor’s signature indicates that the hazards, risks and control measures associated with the task have been reviewed with all persons involved in performing the task.  All completed JHA onboard are to be sent to Office for record. | | |
| **Highly Unlikely** | | | **Slight** | **Minor** | **Medium** |
| **Unlikely** | | | **Minor** | **Medium** | **Major** |
| **Likely** | | | **Medium** | **Major** | **Extreme** |
| **Hazard RISK Matrix** | | | | | | **Approval To PROCEED** | | |
| **Grade** | **Category** | **Action** | | | |
| **Slight** | **1** | **No action required** | | | | All JHA carried out are to be listed in the “Monthly Safety Meeting Minutes”, which is to be sent at the end of each month to the office (Safety Manager – MSD). | | |
| **Minor** | **2** | **No additional controls are required. Monitoring is required to ensure controls are maintained.** | | | |
| **Below risk levels if approved by DGM it is to be submitted to GM for final approval.** | | | | | | **FM/SM** | **DGM** | **GM** |
| **Medium** | **3** | **Efforts should be made to reduce risk. Risk reduction measures should be implemented within a defined time period. When the moderate risk is associated with extremely harmful consequences, further assessment may be necessary to establish more precisely the likelihood of harm as a basis for determining the need for improved control measures.** | | | | Notify  DGM-SMD/MSD | Approve or Reject  +  Notify GM | Approve or  Reject |
| **Major** | **4** | **Work should not be started until the risk has been reduced. Consider available resources, which may have to be allocated to reduce the risk. When the risk involves work in progress urgent action should be taken.** | | | | Notify  DGM-SMD/MSD | Approve or Reject  +  Notify GM | Approve or  Reject |
| **Extreme** | **5** | **Work should not be started or continued until the risk has been reduced. If it is not possible to reduce the risk even with unlimited resources, work has to remain prohibited.** | | | | Notify GM | Notify GM | Approve or  Reject |