

<p>NOTE : Work must be performed in accordance with this SWMS. This SWMS must be kept and be available for inspection until the high risk construction work to which this SWMS relates is completed. If the SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to the high risk construction work in this SWMS, the SWMS must be kept for at least 2 years from the date of the notifiable incident.</p>			
(PCBU Name, ABN, Office Address and Phone)		(Name, ABN, Office Address)	
Works Manager:		Date SWMS provided to PC:	
Contact phone:			
Work activity:	Working at heights	Workplace location:	
High risk construction work involves:	<input type="checkbox"/> Risk of a person falling more than 2 metres <input type="checkbox"/> Work in an area with movement of powered mobile plant	<input type="checkbox"/> Work on or near energised electrical installations or services <input type="checkbox"/> Temporary load-bearing support for structural alterations or repairs <input type="checkbox"/> Use of explosives	<input type="checkbox"/> Work on or near chemical, fuel or refrigerant lines <input type="checkbox"/> Work in areas with artificial extremes of temperature <input type="checkbox"/> Work on or near pressurised gas mains or piping
	<input type="checkbox"/> Tilt-up or precast concrete elements <input type="checkbox"/> Likely to involve disturbing asbestos	<input type="checkbox"/> Work on, in or adjacent to a road, railway, shipping lane or other traffic corridor in use by traffic other than pedestrians	<input type="checkbox"/> Work in or near water or other liquid that involves a risk of drowning
	<input type="checkbox"/> Work in or near a shaft or trench deeper than 1.5 m or a tunnel	<input type="checkbox"/> Work in or near a confined space	<input type="checkbox"/> Diving work
	<input type="checkbox"/> Demolition of load-bearing structure	<input type="checkbox"/> Work in an area that may have a contaminated or flammable atmosphere	<input type="checkbox"/> Work on a telecommunication tower
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<p>Have workers been consulted about the SWMS? Note: Consultation with Health and Safety Representatives (HSRs) should be undertaken where there is a HSR at a workplace</p>			
Person/s responsible for ensuring compliance with SWMS:		Date SWMS received:	
What measures are in place to ensure compliance			



with the SWMS?		
Person responsible for reviewing SWMS control measures:		Date SWMS received by reviewer:
How will the SWMS control measures be reviewed?		
Review date:		Reviewer's signature:
What are the tasks involved?	What are the hazards and risks?	What are the control measures?
List the work tasks in a logical order.	Identify the hazards and risks that may cause harm to workers or the public.	Describe what will be done to control the risk. What will you do to make the activity as safe as possible?
Assess access to work area and weather conditions	Slips, trips, falls, unsecured / unstable ladders, lack of handrails and or edge protection	Secure ladders, steps or ramps, ensure edge protection and handrails are in place where required, and do not work in hazardous weather conditions.
Check equipment and work area below	Falls and trips, equipment in poor condition and lack of PPE	Check condition of equipment, hard hats, gloves, footwear and any other PPE appropriate for this situation.
Arrange tools and Equipment	Falling objects	Provide safe means of raising, receiving, storing and lowering of tools and equipment.
Proceed to work area	Falls, trips due to lack of attention and concentration	Maintain an awareness of surroundings; maintain three points off contact on ladders, steps, and rails at all times.
Carry out the work	Slips, trips, falls, falling objects	Maintain awareness of surroundings, focus vision on work platform (not the ground below) avoid stepping backwards, keep traffic areas and platform clear of materials, avoid hazardous weather conditions.
Leaving the work area	Unsecured tools and equipment, falling objects, slips, trips and falls	Secure tools and equipment against unexpected changes in weather or unauthorised use when vacating the work area. Check stability and any changes to ladders, steps or ramps before descending. Do not carry tools and equipment while descending ladders, have tools and equipment lowered.

Name of Worker/s	Worker signature/s
Date SWMS received by workers	

PLEASE NOTE: It may be necessary to use more than one page to complete an adequate safe work method statement (SWMS).