|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date:** | | |  | | | | | | |
| **Workplace:** | | |  | | | | | | |
| **Item being purchased:** | | |  | | | | | | |
| **Name of person conducting assessment:** | | |  | | | | | | |
| **Pre-purchase section** | | |  | | | | | | |
| This section needs to be completed prior to the request for purchase. Procurement Manager and or BDM will not process a transaction, including credit cards, if the following sections are not completed. | | | | | | | | |
| What is the proposed purchase item: | | | | | | | | |
| What safety information has been obtained? | | |  Equipment manual   Equipment specification   Australian Standard   Material Safety Data Sheet   Other source \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| What hazards have been identified? | | |  Transport   Noise   Manual handling   Other hazards | | |  Storage   Dust   None | | |
| Indicate if the purchase falls into any of these categories: | | |  Hazardous substance   Dangerous goods   Carcinogenic | | |  Radioactive   Not applicable | | |
| How are the identified hazards to be managed? | | |  Elimination   Substitution   Engineering controls | | |  Administrative controls   PPE   N/A | | |
| Is a Safe Working Procedure needed?   Yes  No | | | Who will write the SWP? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  By when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Will the equipment need electrical testing and tagging?   Yes  No | | | Has the requisitioner consulted the end users about safety issues?   Yes  No | | | | | |
| Is training required to ensure safe use?   Yes  No | | | Who will provide the training? \_\_\_\_\_\_\_\_\_\_\_\_\_  By when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Receipt of Goods | | | | | | | | | |
| **Goods received conform to order specifications?** | | | | | | |  | | |
| **Note: Goods are not to be accepted if they do not conform to specifications.** | | | | | | | | | |
| **Sign Off** | | | **Name** | | | **Signature** | | | **Date** |
| Site Manager | | |  | | |  | | |  |