

# HAZCOM REPORT FOR ROOF FALLS

**Name of the worker:** Example\_output

**Designation of the worker:** Overman

**Location of the worker:** Panel 1

**Zone of comfortability:** Orange

## Mitigation Methods

- 1) Escaping is topmost priority.
- 2) Evacuate co-workers in vicinity to roof fall.
- 3) Alert adjacent districts and control station immediately .
- 4) Use emergency ways to exit.
- 5) If not possible, find your own exit way through belt lines, tracks.

## Designation specific mitigation

- 1) Remove any danger observed or reported to him.
- 2) Make sure that dangerous places adequately fenced off.
- 3) Ensure the use of covered walkways or alternative safeguards such as safety nets.

## Frugal Techniques for roof fall detection

- 1) Water sipping at the junction of goaf areas.
- 2) Using a stick and hitting on the roof, if there is a hollow sound then roof fall probability increase.
- 3) Cracking of timber props.

# EMERGENCY PREPAREDNESS

In the event of a medical, rescue or other emergency,

**DIAL “000” or Mobile “112”**

**DO NOT HANG UP UNTIL INSTRUCTED TO DO SO**

Be ready to provide information such as:

- Your name, location and phone number
- Nature of the emergency
- Type of injuries
- Number of people injured / involved
- What assistance is required; and
- What hazards exists.

OTHER EMERGENCY CONTACTS NUMBERS		
External Assistance		Contact Number
Project Office – Boart Longyear		
Ambulance		Ph:
Police		Ph:
Fire		Ph:
Poisons Information Centre		Ph:
Electricity ( D.B.Y.D)		Ph: .
Safe-work SA		Ph: . . . . .
Environmental Protection Agency		Ph:
DMITRE Brukunga Site Office		Ph:
DMITRE Project Manager		Ph:
CFS Brukunga Office		Ph: . . . . .
Brukunga Site Phone		Ph:
Darren Caldwell –Project 1.4 Leader		Ph: . . . . .
Names of Workers trained in first aid:		Assembly Point:
Location of First Aid kit: - Drill Container, vehicles FIRST AID ROOM located at CFS site.		Location of Fire Extinguishers: Drill, container, vehicles
Responsible for maintenance of first aid kit:		Responsible for maintenance of Fire Extinguishers:
Name: _____ Signature: _____		Name: _____ Signature: _____