

DATE - / /		HAZARD/RISK FORM RA-2		JOB NUMBER
⇒ To be completed by team leader daily before starting site work		⇒ All PP employees to work on this site must read and sign this form		
Hazard ID/Risks		circle		Actions/Control
	Do all site workers have current OH&S induction for construction card	YES	NO	<i>Absolute requirement - no card on person = no work on site.</i>
	Have all personnel been inducted to this site	YES	NO	<i>Absolute Requirement - No site Induction = No Site Work.</i>
SITE	Are there Site vehicle access hazards (visibility,traffic,surface)	YES	NO	<i>Install signage as required.</i>
	Is the path safe for personnel and equipment access	YES	NO	<i>Hazards to be noted - RA-3.</i>
	Is the work area clear of rubbish and debris	YES	NO	<i>Essential, remove rubbish or debris as required.</i>
	Are materials and components stored correctly	YES	NO	<i>Essential.</i>
	Will weather,climatic or environmental conditions affect the site	YES	NO	<i>Potenetial hazards to be identified and noted below .</i>
	Will other people be working onsite	YES	NO	<i>Other work/workers to be noted below .</i>
	will there be work at heights,potential for falls or falling objects	YES	NO	<i>All work at heights must have control measures - Noted - RA-3.</i>
	Are there overhead services (power lines,Antenna lines etc)	YES	NO	<i>All overhead services to be identified and noted - RA-3 .</i>
	Are there overhead hazards (trees ,structures, guy ropes etc)	YES	NO	<i>All over head structures/abstruptions to be identified.</i>
	Is there potential for injury due to manual handling	YES	NO	<i>Manual handling and associated risks to be discussed.</i>
	Roof hazards (slippery/damaged,skylights ,antennas,pipes, etc)	YES	NO	<i>All hazardous roof surfaces to be noted below .Skylights covered.</i>
	Are the workers qualified for this work	YES	NO	<i>Absolute requirement - no current qualification = change work.</i>
	Are there trenches or earthworks	YES	NO	<i>Trenches and hazardous earthworks to be signed or barricaded and noted</i>
	Are there vulnerable underground services	YES	NO	<i>Vulnerable services to be identified.</i>
	Will there be confined space entry	YES	NO	<i>Confined space entry procedure to be implemented.</i>
	Are the customer and public aware of site hazards	YES	NO	<i>Install signage as required.</i>
	Are toilet and water amenities available	YES	NO	<i>Essential.</i>
	Do you have access to drinkable water	YES	NO	<i>Essential.</i>
EQUIPMENT	Do you have reliable phone access in case of accident	YES	NO	<i>Essential.</i>
	Is appropriate Personal Protective Equipment available	YES	NO	<i>Essential.</i>
	Are scaffolding,ladders, fall arrest equipment , guardrail to be used	YES	NO	<i>Check all equipment daily before use - Report to supervisor if damaged.</i>
	Are all electrical outlets (generator,meter box,leads etc) RCD protected	YES	NO	<i>Essential.</i>
	Are batteries to be installed or removed	YES	NO	<i>Hazards to be noted - RA-3 . Battery procedures followed.</i>
	Is electrical circuitry or component isolation required	YES	NO	<i>Potential hazards to be isolated tagged and noted - RA-3.</i>

OTHER	Has asbestos been identified on site	YES	NO	<i>Apply Pyramid Power Asbestos procedure.</i>
	List any hazardous substances to be on site (Acids, Gasses, Fuels etc)	YES	NO	<i>List to be noted below.</i>
	Will there be animals on site (pets, stock, snake, insect or bird attack)	YES	NO	<i>Potenetial hazards to be identified.</i>
	Has pressure within the system been isolated, opened or relieved	YES	NO	<i>Potential hazards to be isolated tagged and noted - RA-3.</i>
	In an emergency is the work vehicle the assembly point	YES	NO	<i>Vehicle as assembly point to be identified - or alternative Noted below.</i>
Notes				
	Name	Signature		Name

DATE / /			SAFE WORK METHOD STATEMENT RA-3							JOB NUMBER				
no-			TASK			HAZARDS/RISKS				CONTOL MEASUREs/ACTIONs				
1														
2														
3														
4														
5														
6														
7														

no-	TASK				HAZARDS/RISKS				CONTOL MEASUREs/ACTIONS			
8												
9												
10												

Prioritise	Hazards	How likely	Very likely Any time	likely could happen	unlikely happens rarely	very unlikely	Improvement	Suggestions	Please note	Below
		→								
	How severe	↓								
		Kill or cause serious injury	1	1	2	3				
		Serious injury or illness	1	2	3	4				
		Medical Attention off work	2	3	4	5				
		First Aid	3	4	5	6				