Pre-work Briefing



Work Location:	Signal Relay Hut – located adjacent to Down Illwarra Line – approx 20.350km			Briefing Date: 19/11/14
Scope of work:	Inspect relay cabinet in the relay hut	Site Supervisor:	Bob Jane	Phone: 0412234456
Emergency assembly point:	Access gate on Cremona Ave – gate number xyz	Briefer:	John Smith	Briefer's signature:
First aid kit location:	In the work vehicle parked next to the access gate as above	First Aider:	John Smith	SWMS/SWI Ref #: D2013/80895

Hazards (eg. Site specific hazards identified, including physical environment, human errors, plant and equipment)	Controls (to be implemented to eliminate or reduce the risk to the lowest practicable level)	Responsible for Control (either Sydney Trains or name of Contractor)
Adjacent live line (Down Illawarra)	Use the specified path to and from signal relay hut	All staff on site
Access and egress	Use the closest access gate	All staff on site
Uneven surface, vegetation, hazardous material	Watch your step and stay vigilant. If not sure, do not proceed.	All staff on site
Mobile phone	Only to be used when in a constant safe place. Don't walk around when on the phone.	All staff on site

Issue Date: 23/09/2015

Pre-work Briefing cont.



Participant Acknowledgement												
All incidents and injuries must be reported to the site supervisor (Line Manager) and the Safety Incident and Injury Hotline on 1800 772 779												
Briefer to tick each item below that is applicable and rule a line through those that are not. All paragonal listed below asknowledge that they:												
All persons listed below acknowledge that they: All persons listed below acknowledge that they: are free from the effects of alcohol/drugs/fatigue												
hold the applicable and curr record eg. Construction Indu	rent certificates of competency, trustry Induction	have been made aware of any hazardous materials/substances on site have been briefed on Safety Data Sheets (SDS)										
wear the appropriate Person		The state of the s	have been briefed on the site specific safety management plan									
have been informed of the requirements of the electrical permit (if required)												
 ☑ have been briefed on the SWMS/SWIs/documented safe work practice for the job ☑ have been instructed in the controls recorded in this document and SWMS/SWIs ☑ have been briefed on the results of today's site walk inspection and any new hazards identified and their controls as a result of this inspection 												
Name	Signature	Time of briefing: hh:mm	Amendment briefing: hh:mm & Initial	Name	Signature	Time of briefing: hh:mm	Amendment briefing: hh:mm & Initial					
Bob Jane	Bolyfun	09:20										
Kim Well	Kh hell.	09:20										
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Custodian: Safety Specialist Approved by: Group Manager, Safety and Accreditation Number: SMS-06-FM-4163

Issue Date: 18/09/2015

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