

# Jade Electrical Connection Services Pty Ltd

## Project Specific Risk Management / Safe Work Method Statement

Form 0021

<b>Workplace Address</b>	<b>Date</b>	
<b>Client Name (Builder)</b>	<b>Assessed By</b>	
<b>Activity</b>	<b>Job No.</b>	

### HAZARD IDENTIFICATION and RISK ASSESSMENT

(mark (x) hazards that have been identified for the activity and place the appropriate risk score beside the identified hazard)

Hazard	Risk	Hazard	Risk	Hazard	Risk
<input type="checkbox"/> Falling from height <input type="checkbox"/> Falling objects <input type="checkbox"/> Fall in trench <input type="checkbox"/> Trips and slips <input type="checkbox"/> Hazardous substances <input type="checkbox"/> Needle stick injury <input type="checkbox"/> Sun exposure <input type="checkbox"/> Cuts and abrasions		<input type="checkbox"/> Manual handling <input type="checkbox"/> Fire or explosion <input type="checkbox"/> Burns <input type="checkbox"/> Personal injury <input type="checkbox"/> Hand injury <input type="checkbox"/> Eye injury <input type="checkbox"/> Noise <input type="checkbox"/> Trench collapse		<input type="checkbox"/> Confined spaces <input type="checkbox"/> Struck by plant <input type="checkbox"/> Plant failure <input type="checkbox"/> Plant overturning <input type="checkbox"/> Electric shock <input type="checkbox"/> *Builders Hazard (see note) Other:	

**Risk Levels – High Risk (Class 1) – Medium Risk (Class 2) – Low Risk (Class 3)**

### OTHER REQUIREMENTS

<b>Training Required for the Task</b>	<input type="checkbox"/> Green Card <input type="checkbox"/> Electrician	<input type="checkbox"/> Toolbox Talk <input type="checkbox"/> Site Induction	<input type="checkbox"/> Task Training _____ other
<b>Plant or Equipment Required for the Task</b> <i>(Maintenance for Plant and Equipment is to be conducted as per manufactures specs, all leads and tools to be tested)</i>	<input type="checkbox"/> Ladder <input type="checkbox"/> Scaffold <input type="checkbox"/> EWP <input type="checkbox"/> Grinder	<input type="checkbox"/> Drop Saw <input type="checkbox"/> Drill <input type="checkbox"/> Hammer Drill <input type="checkbox"/> Electric Lead	Any Other Equipment
<b>Personal Protective Equipment (PPE)</b>	<input type="checkbox"/> Hard Hat <input type="checkbox"/> Boots <input type="checkbox"/> High Visibility Shirt	<input type="checkbox"/> Safety Glasses <input type="checkbox"/> Hearing Protection <input type="checkbox"/> Dust Mask	<input type="checkbox"/> Gloves <input type="checkbox"/> Harness Other _____
<b>Legislation, Codes of Practice and Standards Applicable</b>	<input type="checkbox"/> OHS Act 2000 <input type="checkbox"/> Regulations 2001	COP Applicable:	Standard Applicable:

### CONTROL OF IDENTIFIED HAZARDS

What control measures are to be used to control identified Hazards (refer to Hazard Control Checklist)


### PROJECT SPECIFIC RISK ASSESSMENT SIGN OFF

<i>I certify that I have been instructed and fully understand this Project Specific Risk Assessment and JADE Safe Work Method Statements covering the tasks I will be undertaking and shall abide by them to the best of my ability</i>		
<b>Name</b>	<b>Signature</b>	<b>Qualifications and Experience</b>

### BUILDERS HAZARD ALERT

The following hazard has been identified on the above project \_\_\_\_\_

The following action is required to rectify the hazard \_\_\_\_\_

JADE Supervisor Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_