

Work Site Hazard and Risk Control Assessment



SECTION ONE: SITE DETAILS							
Site Address <i>Australian Golf Course Right hand Side of Golf Range and near 4c tree</i>							
Person completing form: <i>Luke Anderson</i>				Date of completion: <i>8-11-11</i>			
Number of persons on site: <i>3</i>				Time of day: <i>7.00</i>			
SECTION TWO: THE TASK							
Tick the tasks or works to be performed on this site during this day as listed below:							
Felling	<input checked="" type="checkbox"/>	Dismantling	<input checked="" type="checkbox"/>	Pruning	<input type="checkbox"/>	Slashing	<input type="checkbox"/>
Chipping	<input checked="" type="checkbox"/>	Tree Inspection	<input type="checkbox"/>	Root Pruning	<input type="checkbox"/>	Cutting Logs	<input checked="" type="checkbox"/>
Excavating	<input type="checkbox"/>	Tree restraint	<input type="checkbox"/>	Seed Collection	<input type="checkbox"/>	Pest Control	<input type="checkbox"/>
Stump Grinding	<input type="checkbox"/>	Deliveries	<input type="checkbox"/>	Wildlife Boxes	<input type="checkbox"/>	Traffic Control	<input type="checkbox"/>
SECTION THREE: THE EQUIPMENT TO BE USED							
Tick the items of equipment listed below you will use to complete the tasks as ticked above:							
Climbing Gear	<input checked="" type="checkbox"/>	Work Platforms	<input type="checkbox"/>	Ladders	<input type="checkbox"/>	Mobile Cranes	<input type="checkbox"/>
Chainsaw	<input checked="" type="checkbox"/>	Stump Grinders	<input type="checkbox"/>	Chippers	<input checked="" type="checkbox"/>	Barrow / Trolley	<input type="checkbox"/>
Truck Cranes	<input type="checkbox"/>	Bob Cats	<input type="checkbox"/>	Rigging Gear	<input type="checkbox"/>	Signs / Cones	<input checked="" type="checkbox"/>
Wire Winches	<input type="checkbox"/>	Lowering Device	<input checked="" type="checkbox"/>	Digging Gear	<input type="checkbox"/>	First Aid Kit	<input checked="" type="checkbox"/>
REMEMBER THE FOUR STEPS TO HAZARD ASSESSMENT							
1. IDENTIFY THE HAZARD				2. ASSESS DANGER AND LIKELYHOOD			
3. CONTROL THE IDENTIFIED RISK				4. MONITOR THE RISK CONSTANTLY			
SECTION FOUR: WEATHER							
Tick the weather conditions for this day							
Light Rain	<input type="checkbox"/>	Heavy Rain	<input type="checkbox"/>	Light Wind	<input type="checkbox"/>	High Wind	<input type="checkbox"/>
Sunny	<input type="checkbox"/>	Very Hot	<input type="checkbox"/>	Lightning Stormy	<input type="checkbox"/>	Overcast	<input checked="" type="checkbox"/>
SECTION FIVE: TREE HAZARDS ON SITE							
Dead Wood	<input checked="" type="checkbox"/>	Hollow Trunk	<input type="checkbox"/>	Dead Tree	<input checked="" type="checkbox"/>	Fungal brackets	<input type="checkbox"/>
Open Cavities	<input type="checkbox"/>	Cracks or splits	<input type="checkbox"/>	Bees or wasps	<input type="checkbox"/>	Termites	<input type="checkbox"/>
Root Damage	<input type="checkbox"/>	Moving in Ground	<input type="checkbox"/>	Decayed Tree	<input type="checkbox"/>	Unnatural lean	<input type="checkbox"/>
SECTION SIX: STAFF HAZARDS ON SITE							
Insufficient Staff	<input type="checkbox"/>	Excess Staff	<input type="checkbox"/>	Untrained Staff	<input type="checkbox"/>	Unsupervised	<input type="checkbox"/>
SECTION SEVEN: SITE SPECIFIC HAZARDS							
Steep Slopes	<input checked="" type="checkbox"/>	Uneven Ground	<input checked="" type="checkbox"/>	Slippery Surfaces	<input type="checkbox"/>	Holes / Trenches	<input type="checkbox"/>
Rocky Ground	<input type="checkbox"/>	Loose Surfaces	<input type="checkbox"/>	Pedestrian Traffic	<input type="checkbox"/>	Pits / Pipes / Drains	<input type="checkbox"/>
Debris on ground	<input type="checkbox"/>	Electricity or Gas	<input type="checkbox"/>	Poisonous Plants	<input type="checkbox"/>	Sharp Objects	<input type="checkbox"/>
Thorny Vegetation	<input type="checkbox"/>	Road Traffic	<input type="checkbox"/>	Poor Weather	<input type="checkbox"/>	Electrical Hazards	<input type="checkbox"/>
SECTION EIGHT: PLANT AND EQUIPMENT HAZARDS							
Faulty Chainsaws	<input type="checkbox"/>	Untrained operator	<input type="checkbox"/>	WLL known	<input type="checkbox"/>	Sharp knives	<input type="checkbox"/>
Ropes inspected	<input type="checkbox"/>	Appropriate size	<input type="checkbox"/>	Suitable guards	<input type="checkbox"/>	Blunt Chains	<input type="checkbox"/>
All Equipment inspected and Safe to use:							
Give Details of faulty equipment:							

REMEMBER THE METHODS OF CONTROLLING HAZARDS

1. THE MOST EFFECTIVE METHOD OF CONTROL IS TO ELIMINATE THE RISK.
2. IF YOU CANNOT ELIMINATE THEN SEPARATE THE PEOPLE FROM THE RISK.
3. IF YOU CANNOT SEPARATE THEN CHANGE THE WORK METHOD.
4. IF YOU CANNOT CHANGE THE WORK METHOD THEN USE P.P.E

SECTION NINE: RISK ASSESSMENT AND CONTROL

List the Hazards as Identified over the page	How are you going to control these Hazards

Detail the Major Risk on Site:


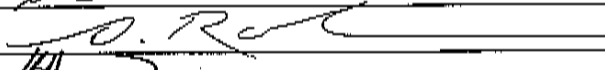
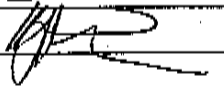
SECTION TEN: POSSIBLE INJURIES

Electrocution	Falling Objects	Slips and Trips	Falls from height
Major Cuts	Crushed / Pinned	Burns	Poisoning
Broken Bones	Chemical spills	Allergy	Foot injury

SECTION ELEVEN: POSSIBLE OUTCOME FROM RISK

Loss of Life	Permanent Injury	A month of work	First aid only
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SECTION TWELVE: CONTRACTORS AND EMPLOYEES MUST COMPLETE

	Print your name clearly	Signature
1	Lupe Davison	
2	SCOTT ROBINSON	
3	Karlton Pitman	
4		
5		
6		
7		
8		
9		
10		