SAFE WORK METHOD STATEMENT
JOB HAZARD ANALYSIS

JOB DESCRIPTION:

Location:

EMERGENCY ACTION PLAN:
- WHO:
- CONTACT:
- RESPONSE:
- ACTION:
- POST INCIDENT:

PLANNED RISK ACTIVITY:
- Work at Heights (>1.8m)
- Manual Tasks
- Hazardous Substance Use
- High Risk Work License Required
- PPE Requirement
- Confined Space Entry

DEVELOPED BY:  REVIEWED BY (use 'Attendance Sheet' if required):

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>Signature</th>
<th>Position</th>
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APPROVAL: (i.e. Contractors / Sub-contractors / Manager) Where required

Name: Signature: Position: Date: 

REVIEW: (NOTE: Work may only proceed once the SWMS/JHA has been reviewed (signed and dated) by the Manager or nominee ie Supervisor)

Name: Signature: Position: Date: 

SR3.3 JSA Template
Rev: Feb 2016
<table>
<thead>
<tr>
<th>Step</th>
<th>Hazard</th>
<th>Inherent Risk Score</th>
<th>Control Methods &amp; Monitoring</th>
<th>Residual Risk Score</th>
<th>Action By</th>
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<td>What control measures will be used?</td>
<td>How will the effectiveness of the controls be determined? (Inspection &amp; ongoing monitoring)</td>
<td>(remaining risk level after safeguards in place)</td>
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If it’s not safe – don’t do it!