

Forklift (Electric)	SAFE WORK METHOD ST	ATEMENT (SWMS)	
TA	ASK OR ACTIVITY: Forklift (Electr	ric)	
Business Name: [Company Name]		ABN: [ABN]	SWMS#
Business Address: [Company Address]			
Contact Person:	Phone: [Phone]	E fil:	
THIS SAFE WORK METHOD	STATEMENT IS APPROVED BY 1	THE P. OF THE PROJECT	
Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.	eting a business or undertaking (N=3U) is	required to ure at a safe work method s	tatement (SWMS) is prepared before
Full Name:			
Signature:		Title:	Date:
Details of the person(s) responsible for ensuring implementation, monitoring a	ompliance of the SWMS well as review	s and modifications of the SWMS.	
Full Name:		Title:	Phone:
ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS WMS. ST HAVE THE FOLLOWING COMMUNICATED	N. 1E AND DATED SIGNATURE OF A CO. MUNICATED TO IN THE DEVELO	LL RELEVANT PERSONNEL WHO HAVE BI PMENT AND APPROVAL OF THIS SWMS	EEN CONSULTED AND
Safety meetings or toolbox talks will be sched ed in accordance with egislative requirements to first identify any site hazards, conditions those hazards and then to further take steps to either the conditions of the conditions are or conditional talks.	NAME	SIGNATURE	DATE
If an incident or a near miss occurs, all work must standardly. Depending on the severity of the incident, a meeting will be called with all workers to amend the SWMS if required. The meeting may also be an educational opportunity.			
Any changes made to the SWMS after an incident or a near miss must be approved by the Person Conducting Business or Undertaking and communicated to all relevant personnel.			
The SWMS must be kept and be available for inspection at least until the work is completed. Where a SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to which the SWMS relates, then the SWMS must be kept for at least two years from the occurrence of the notifiable incident.			



		CL	IENT OR PRINCIPAL	CONTRACTOR D	DETAILS		
Client:						SCOPE OF WORKS	
Project Name:					Provide a detailed description	n of the specific work being	carried out (otherwise
Project Address:					known as cope of works).		
Project Manager:							
Contact Phone:							
Project Manager Sig	gnature:						
Date SWMS supplie	ed to Project Manager:						
		ANY HIGH	RISK CON PUCT	N' JRK BEING	CARRIED OUT		
☐ involves a risk of a p	erson falling more than 2 n	neters.		is carried out on	or near pressurised gas mains	s or piping.	
is carried out on a te	lecommunication tower.		M + M	is carried out on	or near chemical, fuel or refrig	erant lines.	
☐ involves demolition of	of an element of a structure	that is load-be		is carried out on	or near energised electrical ins	stallations or services.	
☐ involves demolition of	of an element related to the	e physical integril of a str	3	is carried out in	an area that may have a conta	minated or flammable atmo	sphere.
☐ involves, or is likely t	o involve, disturbing a es	stos.		☐ involves tilt-up o	r precast concrete.		
☐ involves structural al	teration or repair that re	mporal, upp to p	prevent collapse.	is carried out on	, in or adjacent to a road, railwa	ay, shipping lane or other tr	affic corridor.
is carried out in or ne	ear a confined space.			is carried out in	an area of a workplace where t	there is any movement of po	owered mobile plant.
☐ is carried out in/near	a shaft or trench deeper th	nan 1.5m or tunnel involvir	ng use of explosives.	is carried out in	areas with artificial extremes of	f temperature.	
is carried out in or ne	ear water or other liquid tha	at involves a risk of drowning	ng.	involves diving v	vork.		
		ANY H	IGH-RISK MACHINER	RY OR EQUIPMEN	NT NEARBY		
☐ Forklift	☐ Crane/s	☐ Hoist/s	☐ Excavator	☐ Backhoe/Loader	Boom Lift	□ EWP	☐ Genie Lift
☐ Trencher	☐ Drilling Rig	Trucks	Formwork	☐ Bobcat	☐ Flammable Gas	☐ Fuel	☐ Dozer
☐ High Voltage	☐ Mulcher	☐ Tilt-up Panels	Roller	☐ Scissor Lift	☐ Tractor	☐ Other -	





#### FOOT HAND **HEAD HEARING** SPIRATORY FACE HIGH-VIS **PROTECTIVE** FALL SUN HAIR/JEWELLERY CLOTHING **PROTECTION PROTECTION** PROTECTION **PROTECTION** PROTE DTECTION **PROTECTION** CLOTHING **PROTECTION PROTECTION SECURED**

Select me appropriate PPE above suitable for the equipment used or the job task being performed (if applicable).

**Note:** A SWMS must be reviewed regularly to make sure it remains effective. A SWMS must be reviewed (and revised if necessary) if relevant control measures are revised. The review process should be carried out in consultation with workers (including contractors and subcontractors) who may be affected by the operation of the SWMS and their health and safety representatives who represented that work group at the workplace.

When a SWMS has been revised, the person conducting a business or undertaking must ensure all:

- 1. persons involved in the work are advised that a revision has been made and how they can access the revised SWMS;
- 2. persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS: and.
- 3. workers that will be involved in the work are provided with the relevant information and instruction that will assist them to understand and implement the revised SWMS.



JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR	RESPONSIBLE PERSON
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
1. Preparation	Improper PPE, Lack of operator training	2M	<ul> <li>Ensure that all workers operating a forklift have completed relevant training and hold appropriate licenses, including training in batter charging procedures for electric forklifts.</li> <li>Regularly provide refresher courses and a sutonal training as required to keep operators up-to-date with best practices and changes in equilations related to forklift operation.</li> <li>Conduct pre-shift safety brigfings to communicate the importance of proper PPE usage, safe work practices, a cany specific hazar present or the work area.</li> <li>Provide personal promitive equipment (PPE) suitable for the forklift tasks being performed, such practices, and such present of the forklift vests, and safety glasses as recorded.</li> <li>Implement all enforces policy requirement personnel to wear appropriate PPE in the formoperation of a stall times.</li> <li>Control to quality a specific risk assessments to ensure that the environment is conducted to affect the affective preation, taking into account factors like floor conditions, lighting, and professional affect.</li> <li>Intablis and notatin designated areas for forklift operation and storage, clearly many two appropriate warning signs.</li> <li>Implement an effective maintenance programme for all forklifts, including routine in actions and timely repairs to reduce the risk of equipment malfunction.</li> <li>Ensure that electric forklift charging stations are set up correctly, well-ventilated, equipped with emergency eyewash stations, and maintained by qualified personnel.</li> <li>Implement a system for clear communication between forklift operators and other personnel in the vicinity, such as the use of horns, signal lights, or designated spotters.</li> <li>Develop and implement standard operating procedures (SOPs) for forklift operators, addressing hazards like speed limits, load capacities, and proper stacking techniques.</li> <li>Promote a culture of accountability and safety through management leadership, encouraging staff to report near misses, unsafe work p</li></ul>	1L	
2. Pre-start	Forklift malfunction, Obstructed view	2M	- Conduct daily pre-start inspections: Check and verify that all forklift components, including the brakes, steering, controls, and safety devices, are in proper working condition before operation.	1L	



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			- Ensure all forklift operators have appropriate training and certifications: Only allow workers with adequate experience, competency, and necessary licenses to operate electric forklifts.		
			- Develop a clear traffic management plan: Est as h designated routes and separate pedestrian walkways in the workplace to means the risk of collisions and other incidents related to obstructed views.		
		- Remove visible obstructions from the work at the part of the work environment clean and orderly by clearing away any unnecessary of the could impair visibility for the forklift operate.			
		- Utilise designated comes who necessary: Employ a med individuals to assist the forklift operation many vering the machine enfely, especially during challenging or risky situations.			
		- Encourage round communication be an workers: Promote the use of hand signal to-way discorrother communication methods to ensure that all emploses are away of the forklift's location and intended movements.			
			- Install pairs and or eras on forklifts: Enhance visibility for the operator with the aid of stategy typical mirrors and/or camera systems that grant a more mprehasive aw of the machine's surroundings.		
	•		- Implyine tregular forklift maintenance schedules: Routinely inspect, repair, and applace by or worn-out components as needed to prevent malfunctions.		
			- pvide adequate lighting in the workspace: Make sure there is sufficient illumination in the work area to enable the forklift operator to see potential obstacles and navigate safely.		
	5		- Require operators to honk the horn at intersections or blind spots: Emphasise the importance of using sound signals when approaching areas with obstructed views to alert other workers and avoid accidents.		
			- Train employees on emergency procedures and response plans: Familiarise all staff members with the steps to take in the event of a forklift malfunction or other workplace emergencies, such as evacuations and how to report incidents.		
			- Evaluate and revise existing policies on an ongoing basis: Regularly review and update workplace health and safety protocols to ensure maximum effectiveness in minimising hazards associated with electric forklift operation.		
			- Prior to any operation, conduct a thorough inspection of the work area to clearly identify potential hazards related to inadequate signage and slips and trips.		
3. Zone marking	Inadequate signage, Slips and trips	2M	- Install clearly visible warning signs at all entry and exit points for designated forklift zones to inform pedestrians and other workers about the presence of forklift operations in the area.	1L	
			- Utilise high-visibility and reflective marking tape to clearly designate forklift travel paths within the facility, ensuring they are easy to follow for both operators and pedestrians.		



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			- Make sure that all employees receive proper training on recognizing and understanding the purpose of the established markings and signage, along with their responsibilities to adhere to them.		
			- Regularly clean and maintain floors and surface, within the marked zones to minimise the risk of slips and trips due to d'an debris buildup.		
			- Conduct periodic audits to assess the effect these time implemented control measures and make any necessary adjustment of the prove their efficacy.		
			- In low-light situations or are without adequate bring, escusish supplementary portable lighting solutions to in pase visibility of managed uses and signage for all workers.		
			- Clearly mark ps, slope and changes in level within the forklift-operating zone to reduce slip a strip hazard		
		- Kee alkway and the oughfares clearrom obstructions that could create additional plip an arrayards or obstruct access for the forklift.			
		- Imple en proce for quickly addressing spills, wet patches, and moisture build- up to migratione risk slips within marked forklift zones.			
			ncour le op communication between forklift operators and nearby personnel, en rag g both, parties to remain aware of each other's movements and minim. The risks associated with inadequate signage.		
			nsure that all staff wear appropriate personal protective equipment (PPE) when we sing around forklifts, such as non-slip footwear, to further reduce the risk of slips and trips.		
			- Regularly review and update the SWMS for electric forklift usage to incorporate any new hazards, risks or control measures identified during ongoing workplace assessments.		
4. Load lifting	Unstable load, Overloading	3H		2M	



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5. Manoeuvring	Collisions, Pedestrian injury	3Н		2M	



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		NISK		NISK	



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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
6. Stacking	Load instability, Tip-over	31-		2M	



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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
SPECIFIC WORK STEPS		INITIAL		RESIDUAL	



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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
8. Unloading	Dropped load, Pinch points			2M	



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9. Inspection	Missed damage, Defective equipment	21/1		1L	



SPECIFIC WORK STEPS HAZARDS THAT MAY ARISE INITIAL RISK SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS RESIDUAL RISK NAME OF CONTROL THE RISKS RISK NAME OF CONTROL THE RISKS RESIDUAL RISK NAME OF CONTROL THE RISKS RISK NAME OF CONTROL THE RISK RISK RISK NAME OF CONTROL THE RISK RISK RISK NAME OF CONTROL THE RISK RISK RISK RISK RISK RISK RISK RISK	RESPONSIBLE PERSON
	NAME OF PERSON
10. Parking  Unauthorised access, Poor visibility  2. 1L	PERSON



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11. Maintenance	Caught in machin , Electrical bazards	ЗН		1L	



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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
12. Shut down	Unintended movement, interference	2M		1L	



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#### **EMERGENCY RESPONSE - CALL 000 FOR EMERGENCIES**

Ensure to have an Emergency Management Plan in place as well as adequate numbers of trained first aid staff with easy access to fully stocked first aid kits, rescue equipment, material safety data sheets, adequate access to emergency communication equipment and fire-fighting equipment suitable for all classes of fire and ignition sources.

#### LEGISLATIVE REFERENCES

RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES. ANY STATE OF AT ARE NOT APPLICABLE.

#### **Queensland & Australian Capital Territory**

Work Health and Safety Act 2011

Work Health and Safety Regulations 2011

 $\textbf{Legislation QLD:} \ \underline{\textbf{https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws}$ 

Codes of Practice QLD: https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice Legislation ACT: https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations

Codes of Practice ACT: https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice

#### **New South Wales**

Work Health and Safety Act 2011

Work Health and Safety Regulations 2017

Legislation NSW: https://www.safework.nsw.gov.au/legal-obligations/legislati

Codes of Practice NSW: https://www.safework.nsw.gov.au/resource-library/lis > odes-or racti

#### **Northern Territory**

Work Health and Safety (National Uniform Legislation) Act 2011

Work Health and Safety (National Uniform Legislation) Regulation 2011

Legislation NT: https://worksafe.nt.gov.au/laws-and-compliance/worksafe.nt.gov.au/laws-and-compl

Codes of Practice NT: https://worksafe.nt.gov.au/s

#### South Australia

Work Health and Safety Act 2012 (SA)

Work Health and Safety Regulations 2012 (SA)

Legislation for SA: <a href="https://www.safework.sa.gov.au/resources/legislation">https://www.safework.sa.gov.au/resources/legislation</a>

Codes of Practice for SA: https://www.safework.sa.gov.au/work\_aces/codes-of-practice#COPs

#### Tasmania

Work Health and Safety Act 2012

Work Health and Safety (Transitional and Consequential Provisions) Act 2012

Work Health and Safety Regulations 2012

Work Health and Safety (Transitional) Regulations 2012

Legislation for TAS: https://worksafe.tas.gov.au/topics/laws-and-compliance/acts-and-regulations

Codes of Practice for TAS: https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice

Details of permits, licenses or access required by regulatory bodies (add or delete as required):

- Permits from local council
- Authorisation to commence work
- Any required documents.

#### Victoria

Occupational Health all Safety Act

Occupational Health and Infety gulations 2017

Legis on VIC: https://www.safe.vic.gov.au/occupational-health-and-safety-act-and-

<u>Julai.</u>

des on actice VIC attps://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice

#### Western Australia

Work Health and Safety Act 2020

Work Health and Safety Regulations 2022

Legislation Western Australia: <a href="https://www.commerce.wa.gov.au/worksafe/legislation">https://www.commerce.wa.gov.au/worksafe/legislation</a>

Codes of Practice WA: https://www.commerce.wa.gov.au/worksafe/codes-practice

#### Safe Work Australia Links

Law and Regulation (All States): https://www.safeworkaustralia.gov.au/law-and-regulation Model Codes of Practice: https://www.safeworkaustralia.gov.au/resources-publications/model-codes-of-practice

#### **Model Codes of Practice**

- Managing noise and preventing hearing loss at work
- Confined spaces
- Labelling of workplace hazardous chemicals
- Managing risks of hazardous chemicals in the workplace
- Welding processes
- First aid in the workplace
- Managing the risk of falls at workplaces
- Hazardous manual tasks
- Managing the risk of falls in housing construction
- Managing electrical risks in the workplace
- Demolition work
- Excavation work
- Work health and safety consultation, cooperation and coordination
- Managing the work environment and facilities
- How to manage work health and safety risks
- Managing risks of plant in the workplace
- Construction work



### SIGNATORIES OF THE SAFE WORK METHOD STATEMENT

The signed and dated personnel listed below have cooperated in the consultation and development of this Safe Work Method Statement which has been approved by the Person/s Conducting a Business or Undertaking (PCBU). In signing this Safe Work Method Statement each individual acknowledges and confirms that they have read this SWMS in full, having raised any questions for items on this Safe Work Method Statement that require clarification, and confirms that they are competent, skilled and knowledgeable for the task assigned to them. Every person acknowledges that they have received the relevant training and qualifications where required, before carrying out any work contained in this Safe Work Method Statement. By signing this Safe Work Method Statement each individual agrees to work safely, to follow any safe work instructions which are provided, and agrees to use all Personal Protective Equipment where appropriate.

Tollow any sale work instructions which are provided, and agrees to use an reisonal riotective Equipment where appropriate.								
Worker Name	Pos	sition	Signature	Date	Time	Sup	pervisor	
				Date:				
			_					
			Date					
			l te:					
			AV	Date:				
				Date:				
				Date:				
Date:								
		SAF WO A S	THUD STATEMENT	MONITORING AND	REVIEW			
The SWMS must be reviewed regularly to the ke sure it remains effective and must be reviewed (and revised if necessary) if relevant control measurements are subcontracted by process should be carried out in consultation with workers (including contractors are subcontracted)) who may be affected by the operation of the SWMS and their health and safety representatives who researched that work group at the workplace.  When the SWMS has been revised the PCBU must ensure that all persons involved with the work are advised that a revision has been made and how they can access the revised SWMS, including all persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS. All workers that will be involved in the work must be provided with the relevant information and instruction that will assist				The SWMS must be monitored regularly for the effectiveness of ensuring hazard controls are effective in reducing the risk of incidents, keeping the workplace safe for all personnel. The person responsible for monitoring the effectiveness of the Safe Work Method Statement should employ a multi-faceted approach which includes but is not limited to:  1. Spot Checks. 2. Consultation with workers, contractors and sub-contractors. 3. Internal audits on a continual basis.  An approach of continuous improvement, promptly recording inconsistencies or deficiencies, followed up by immediate corrective action and consultation with all relevant personnel ensures				
them to understand and imp					tently developing ever-imp	<b>3</b> ,	· '	
REVIEW NUMBER	1	□ 2	□ 3	□ 4	□ 5	□ 6	□ 7	
NAME								
INITIALS								
DATE								



### SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

This Safe Work Method Statement Review Checklist is to be followed and used upon initial development of the SWMS to help ensure that all steps have been adequately taken before work commences. Think of this document as an internal audit review checklist before commencing work, and may form part of a Toolbox Talk (safety meeting) and may be used as an opportunity for education and training.

ITEMS WHICH MUST BE INCLUDED IN THE SWMS	COMPLETED	TO BE DONE	COMMENTS
The company details have been entered, including the project name and address.			
Names and signatures of all relevant personnel consulted during the development of the SWMS.		P P	
Name, signature, position and date signed of the person approving the SWMS.			
Specific personnel and qualifications, experience is noted in the SWMS.	P		
Provides a step-by-step process of tasks required to carry out the activity or task.			
Adequate risk assessment of any identified hazards has been completed.			
Foreseeable hazards are identified and documented for each step.			
Any hazards listed in any site risk assessments have been added to the SWh			
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.			
Check control measures added to the SWMS are the most effecting so tions.			
Responsible person is assigned and listed on the SWMS for the imperent of continue assures.			
Permit requirements specified, such as Hot Work, Veralt Heights etc.			
SWMS identifies plant and equipment to be u d.			
Details of inspection checks required for any equipment listed are noted on the SWMS.			
Describes any mandatory qualifications, experience raining skills required to perform the work.			
Applicable personal protective equipment is selected on the SWMS.			
Lists any required permits or licenses.			
Reflects and documents any legislative references and/or Australian Standards.			
dentifies any hazardous substances used with specific control measures in line with any SDS.			
REVIEWED BY	DATE R	EVIEWED	
SIGNATURE	DATE CO	MPLETED	