Drilling & Abseil Services Ltd

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NZDF member NZI Policy 70 6769460 BPK 70 6769460 BPK

Hazard ID Form (Work Safety Plan)

Area / Equipment to be worked on

Work to be done:

Job No / Permit No: Date: Supervisor:

HAZARD **DESCRIPTIONS**	**Is this** hazard significant	**METHOD OF CONTROLLING** THE **HAZARD** Control Hierarchy is Eliminate, Isolate, Minimize	Control Type E, I or M

EMERGENCY PLANNING Is an emergency plan required? - (to be discussed and agreed with work party)	YES / NO
Emergency plan details — Who will do What Use separate sheet if required	

ACKNOWLEDGMENT OF THE HAZARDS AND CONTROLS (Print & sign then initial & date at each review)

Supervisor Confirmation of Hazard ID & Safety Plan		Review	Review	Review	Review	Review
Name	Date					

Work Party Confirmation of Hazard ID & Safety Plan		Review	Review	Review	Review	Review
Name	Date					
Name	Date					
Name	Date					
Name	Date					
Name	Date					
Name	Date					
Name	Date					