

| Safety Inspection For Flooring                                                                                                                                                                                                                                                                                             | Equipment   SAFE WORK                                                                                                                                   | METHOD STATEMENT (SWM                          | IS)                                 |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------|--|--|--|--|--|
| TASK OR ACTI                                                                                                                                                                                                                                                                                                               | VITY: Safety Inspection For Floo                                                                                                                        | ring Equipment                                 |                                     |  |  |  |  |  |
| Business Name:                                                                                                                                                                                                                                                                                                             |                                                                                                                                                         | ABN:                                           | SWMS#                               |  |  |  |  |  |
| Business Address:                                                                                                                                                                                                                                                                                                          |                                                                                                                                                         |                                                |                                     |  |  |  |  |  |
| Contact Person:                                                                                                                                                                                                                                                                                                            | Phone:                                                                                                                                                  | E ail:                                         |                                     |  |  |  |  |  |
| THIS SAFE WORK METHOD                                                                                                                                                                                                                                                                                                      | STATEMENT IS APPRO                                                                                                                                      | THE PC. OF THE ROJECT                          |                                     |  |  |  |  |  |
| Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.                                                                                                                                                                                                                   | ting a business or under the (Poull) is                                                                                                                 | required to entry that a safe work method s    | statement (SWMS) is prepared before |  |  |  |  |  |
| Full Name:                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                         |                                                |                                     |  |  |  |  |  |
| Signature:                                                                                                                                                                                                                                                                                                                 | NK                                                                                                                                                      | Title:                                         | Date:                               |  |  |  |  |  |
| Details of the person(s) responsible for ensuring implementation, monitoring                                                                                                                                                                                                                                               | Details of the person(s) responsible for ensuring implementation, monitoring and appliance of the VMS ar well as reviews and modifications of the SWMS. |                                                |                                     |  |  |  |  |  |
| Full Name:                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                         | Title:                                         | Phone:                              |  |  |  |  |  |
| ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS MAKEN HAVE THE FOLLOWING COMMUNICATED                                                                                                                                                                                                                                  | NALE OF ALL RELEVANT PERSONN<br>EVELOPMENT AND APPROVAL OF                                                                                              | EL WHO HAVE BEEN CONSULTED AND CO<br>THIS SWMS | DMMUNICATED TO IN THE               |  |  |  |  |  |
| Safety meetings or toolbox talks will be sched ad in account with regislative requirements to first identify any site hazards, a company nical those hazards and then to further take steps to either eliminate or contract hazard.                                                                                        |                                                                                                                                                         |                                                |                                     |  |  |  |  |  |
| If an incident or a near miss occurs, all work must stop an alately. Depending<br>on the severity of the incident, a meeting will be called with all workers to amend<br>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<br>approved by the Person Conducting Business or Undertaking and<br>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. |                                                                                                                                                         |                                                |                                     |  |  |  |  |  |



| CLIENT OR PRINCIPAL CONTRACTOR DETAILS                                                    |                                                                                                     |  |  |  |  |  |
|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Client:                                                                                   | SCOPE OF WORKS                                                                                      |  |  |  |  |  |
| Project Name:                                                                             |                                                                                                     |  |  |  |  |  |
| Project Address:                                                                          |                                                                                                     |  |  |  |  |  |
| Project Manager:                                                                          |                                                                                                     |  |  |  |  |  |
| Contact Phone:                                                                            |                                                                                                     |  |  |  |  |  |
| Date SWMS supplied to Project Manager:                                                    |                                                                                                     |  |  |  |  |  |
| ANY HIGH-RISK CONSTRUC                                                                    |                                                                                                     |  |  |  |  |  |
| ☐ involves a risk of a person falling more than 2 meters                                  | I is carried out on or near pressurised gas mains or piping                                         |  |  |  |  |  |
| □ is carried out on a telecommunication tower                                             | carried out on or near chemical, fuel or refrigerant lines                                          |  |  |  |  |  |
| ☐ involves demolition of an element of a structure that is load-bearing                   | □ is carried out on or near energised electrical installations or services                          |  |  |  |  |  |
| □ involves demolition of an element related to the physical integ. Y of a sucture         | $\square$ is carried out in an area that may have a contaminated or flammable atmosphere            |  |  |  |  |  |
| □ involves, or is likely to involve, disturbing asb                                       | ☐ involves tilt-up or precast concrete                                                              |  |  |  |  |  |
| involves structural alteration or repair that quires terrar by supart to prevent collapse | ☐ is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor     |  |  |  |  |  |
| □ is carried out in or near a confined space                                              | $\Box$ is carried out in an area of a workplace where there is any movement of powered mobile plant |  |  |  |  |  |
| is carried out in/near a shaft or trench deeper that tunnel involving use of explosives   | ☐ is carried out in areas with artificial extremes of temperature.                                  |  |  |  |  |  |
| ☐ is carried out in or near water or other liquid that involves a risk of drowning.       | ☐ involves diving work.                                                                             |  |  |  |  |  |
| ANY HIGH-RISK MACHINER                                                                    | RY OR EQUIPMENT NEARBY                                                                              |  |  |  |  |  |
|                                                                                           |                                                                                                     |  |  |  |  |  |
|                                                                                           |                                                                                                     |  |  |  |  |  |
|                                                                                           |                                                                                                     |  |  |  |  |  |



| RISK MATRIX       |               |               |               |            |              |                |                                         |  |                                    |  |
|-------------------|---------------|---------------|---------------|------------|--------------|----------------|-----------------------------------------|--|------------------------------------|--|
| LIKELIHOOD        | INSIGNIFICANT | MINOR         | MODERATE      | MAJOR      | CATASTROPHIC | SCORE          |                                         |  | HEIRARCHY OF CONTROLS              |  |
| ALMOST<br>CERTAIN | 3<br>HIGH     | 3<br>HIGH     | 4<br>ACUTE    | 4<br>ACUTE | 4<br>ACUTE   | SCORE          | ACTION                                  |  | Elimination<br>Remove the hazard.  |  |
| LIKELY            | 2<br>MODERATE | 3<br>HIGH     | 3<br>HIGH     | 4<br>ACUTE | 4<br>ACUTE   | 4A<br>ACUTE    | DO NOT<br>PROCE                         |  | Substitution                       |  |
| POSSIBLE          | 1<br>LOW      | 2<br>MODERATE | 3<br>HIGH     | 4<br>ACUTE | 4<br>ACUTE   | 3H<br>HIGH     | Review befor<br>work starts.            |  | Replace the hazard.                |  |
| UNLIKELY          | 1<br>LOW      | 1<br>LOW      | 2<br>MODERATE | 3<br>HIGH  | 4<br>ACUTE   | 2M<br>MODERATE | Ensure control<br>measures in<br>place. |  | Isolate People from the hazard     |  |
| RARE              | 1<br>LOW      | 1<br>LOW      | 2<br>MODERATE | 3<br>HIGH  | 3<br>HIGH    | 1L<br>LOW      | nitor and<br>k⊾ records                 |  | Engineering<br>Isolate the hazard. |  |
|                   |               |               |               |            |              |                |                                         |  |                                    |  |

|                     |                                                                       |                    |               |             |                            | TIVE EQUIPM        |                      |                        |                    |                   |                           |
|---------------------|-----------------------------------------------------------------------|--------------------|---------------|-------------|----------------------------|--------------------|----------------------|------------------------|--------------------|-------------------|---------------------------|
|                     |                                                                       | Select the ap      | propriate PPL | abo, ruitab | i or the equi              | oment used or      | the job task         | being perform          | ned (if applica    | able).            |                           |
| FOOT<br>PROTECTION  | HAND<br>PROTECTION                                                    | HEAD<br>PROTECTION |               | P ECTION    | R⊾ ⇒PIRATORY<br>PROTECTION | FACE<br>PROTECTION | HIGH-VIS<br>CLOTHING | PROTECTIVE<br>CLOTHING | FALL<br>PROTECTION | SUN<br>PROTECTION | HAIR/JEWELLERY<br>SECURED |
|                     |                                                                       |                    |               |             |                            |                    |                      |                        |                    |                   |                           |
|                     |                                                                       |                    |               |             |                            |                    |                      |                        |                    |                   |                           |
| Other PPE Required: |                                                                       |                    |               |             |                            |                    |                      |                        |                    |                   |                           |
|                     | Permit or Licenses Requirements Mandatory Qualifications and Training |                    |               |             |                            |                    |                      |                        |                    |                   |                           |
|                     |                                                                       |                    |               |             |                            |                    |                      |                        |                    |                   |                           |

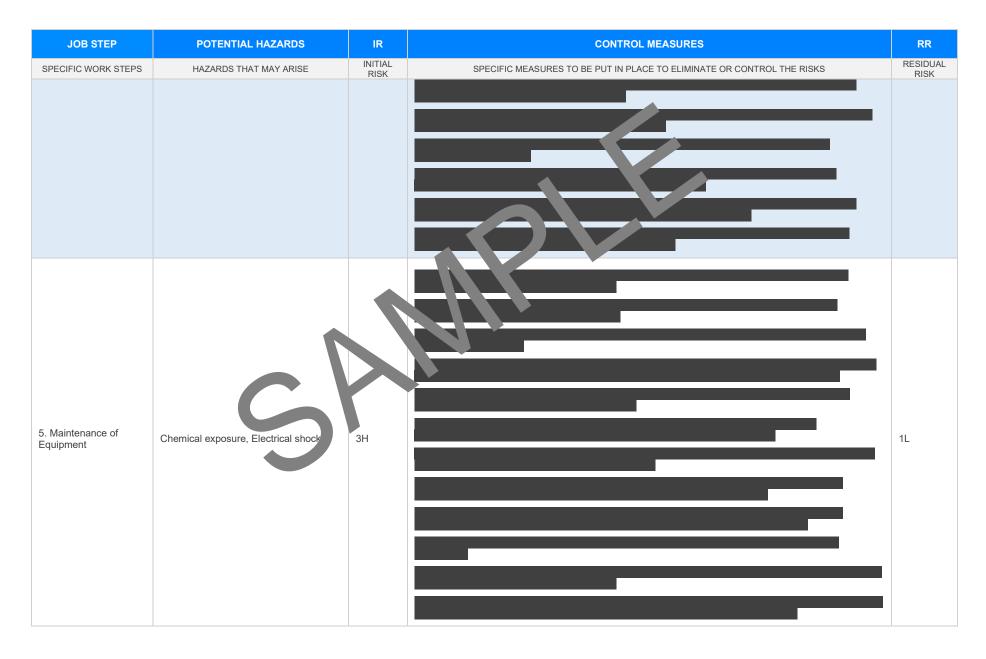


| JOB STEP                     | POTENTIAL HAZARDS                                                | IR              | CONTROL MEASURES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | RR               |
|------------------------------|------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| SPECIFIC WORK STEPS          | HAZARDS THAT MAY ARISE                                           | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | RESIDUAL<br>RISK |
| 1. Preparation               | Slips, trips, and falls, Mishandling<br>equipment                | ЗН              | <ul> <li>Ensure all personnel have received properturning in handling flooring equipment to minimise the risk of mishandling.</li> <li>Keep the work area well-organised and free values to prevent slips, trips, and falls.</li> <li>Inspect flooring tools and extrement for defects a damage have use and report any issues immediately.</li> <li>Use appropriate line or the prevent mechanical aids when moving heavy equipment to prevent mishandling iptices.</li> <li>Conduct a prestart safet wriefing to use an azards specific to the flooring inspection task.</li> <li>Ensign dequabliciting in the workspace to enhance visibility and reduce trip hazards.</li> <li>Wear propriate propriate protective equipment (PPE), such as non-slip footwear, gloves, and eye protection.</li> <li>Clearly mark and secure any potentially hazardous zones within the work area to prevent unauthorised ass.</li> <li>Regular audit the workspace for potential slip, trip, and fall hazards, addressing them promptly.</li> <li>evelop and communicate an emergency response plan for potential incidents involving flooring equipment.</li> <li>Store tools and equipment in designated areas when not in use to avoid creating tripping hazards.</li> <li>Use anti-slip mats or coatings on slippery surfaces to provide additional traction.</li> </ul> | 2M               |
| 2. Transport of<br>Equipment | Injury from heavy lifting, Accidents<br>during transportation 3H |                 | <ul> <li>Utilise proper manual handling techniques to prevent strain or injury when lifting equipment.</li> <li>Use mechanical aids such as trolleys, dollies, or forklifts to assist in moving heavy equipment.</li> <li>Conduct a risk assessment prior to transportation to identify potential hazards and control measures.</li> <li>Limit the weight of equipment being lifted manually to the safe limits specified by workplace safety guidelines.</li> <li>Engage multiple workers for team lifting when equipment cannot be moved safely by one person.</li> <li>Securely strap down equipment to avoid movement during transportation.</li> <li>Perform regular maintenance checks on transportation vehicles and equipment to ensure they are in good working condition.</li> <li>Ensure that transport routes are free from obstacles and debris that could cause accidents.</li> <li>Train all workers involved in transportation on safe lifting and carrying practices and provide appropriate supervision.</li> </ul>                                                                                                                                                                                                                                                                                                                            | 2M               |



| JOB STEP                            | POTENTIAL HAZARDS                          | IR              | CONTROL MEASURES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | RR               |
|-------------------------------------|--------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| SPECIFIC WORK STEPS                 | HAZARDS THAT MAY ARISE                     | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | RESIDUAL<br>RISK |
|                                     |                                            |                 | - Use high-visibility clothing and signage to alert others when transporting equipment through shared or high-traffic areas.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  |
|                                     |                                            |                 | - Plan transportation activities during low traffic time to minimise the risk of accidents.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |
| 3. Setting up Flooring<br>Equipment | Electrical hazards, Incorrect setup        | ЗН              | <ul> <li>Conduct a pre-start equipment inspection ordentify approxible electrical faults or physical damage.</li> <li>Ensure all electrical connections and extensive leaver are properly insulated and in good condition.</li> <li>Use equipment that complies with Australian save standardword has an up-to-date test and tag.</li> <li>Keep all electrical cords and works away from wats not uses and high traffic areas to prevent trips and falls.</li> <li>Provide addenate training or workers on the extect setup and use of flooring equipment.</li> <li>Utilize residue current dences (RCD extend of fleetricity supply in case of a fault.</li> <li>Marker a cleaver of grant area to avoid interference and ensure sufficient space for safe operation.</li> <li>Verify native emergency stop buttons are working and easily accessible during equipment setup.</li> <li>Secure all moding parts and guards in place as per the manufacturer's guidelines before starting the externel.</li> <li>Use provide all protective equipment like insulated gloves when handling electrical components.</li> <li>give a qualified electrician inspect and maintain flooring equipment regularly to ensure safety and compliance.</li> </ul> | 1L               |
| 4. Operating the<br>Equipment       | Noise exposure, Vibration-induced injuries | ЗН              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2M               |

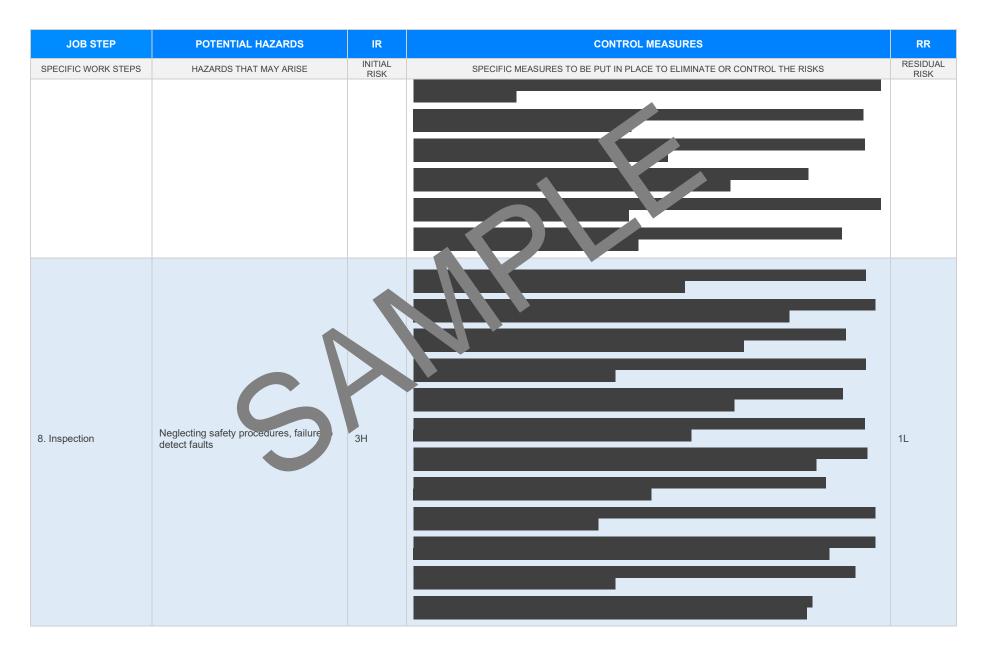






| JOB STEP                      | POTENTIAL HAZARDS                                                         | IR              | CONTROL MEASURES                                                       | RR               |
|-------------------------------|---------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------|------------------|
| SPECIFIC WORK STEPS           | HAZARDS THAT MAY ARISE                                                    | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK |
| 6. Cleaning up Site           | Inadequate waste disposal, Tripping<br>over debris                        | 2М              |                                                                        | 1L               |
| 7. Dismantling and<br>Storage | Pinch points from disassembling machinery, Falling objects during storage | ЗН              |                                                                        | 2M               |



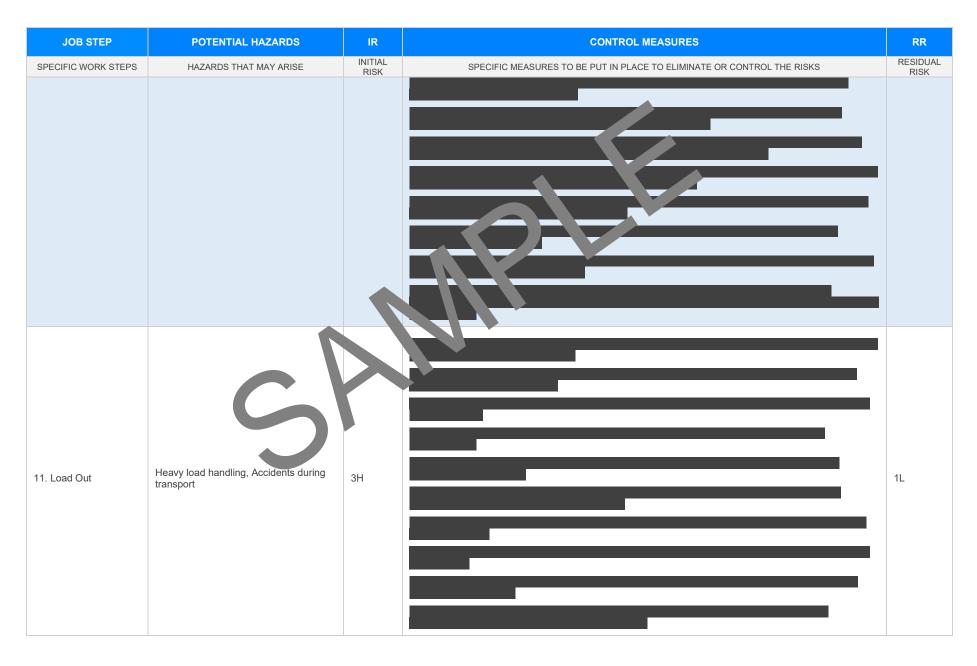




| JOB STEP                      | POTENTIAL HAZARDS                                            | IR              | CONTROL MEASURES                                                       | RR               |
|-------------------------------|--------------------------------------------------------------|-----------------|------------------------------------------------------------------------|------------------|
| SPECIFIC WORK STEPS           | HAZARDS THAT MAY ARISE                                       | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK |
| 9. Re-setting for Next<br>Job | Improper lifting techniques, disregarding inspection results | 2M              |                                                                        | 1L               |
| 10. Final Clean-up            | Chemical exposure, Incorrect waste disposal                  | 2M              |                                                                        | 1L               |

Version 2.5





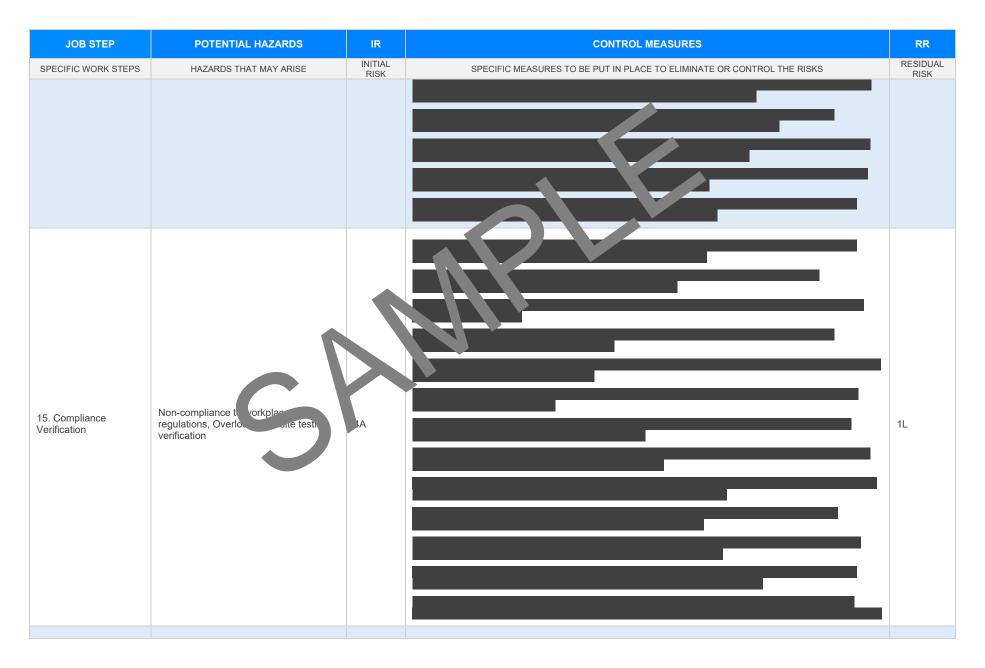


| JOB STEP                          | POTENTIAL HAZARDS                                      | IR              | CONTROL MEASURES                                                       | RR               |
|-----------------------------------|--------------------------------------------------------|-----------------|------------------------------------------------------------------------|------------------|
| SPECIFIC WORK STEPS               | HAZARDS THAT MAY ARISE                                 | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK |
|                                   |                                                        |                 |                                                                        |                  |
| 12. Document updating             | Work stress , ergonomic-related problems               | 2M              |                                                                        | 1L               |
| 13. Regular Equipment<br>Checking | Ignoring regular checks , not reporting faults in time | ЗН              |                                                                        | 2M               |











| JOB STEP            | POTENTIAL HAZARDS      | IR              | CONTROL MEASURES                                                       | RR               |
|---------------------|------------------------|-----------------|------------------------------------------------------------------------|------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK |
|                     |                        |                 |                                                                        |                  |
|                     |                        |                 |                                                                        |                  |



#### **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 REF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ERENCES                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES ANY STATE AT ARE NOT APPLICABLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |
| Queensland & Australian Capital Territory<br>Work Health and Safety Act 2011<br>Work Health and Safety Regulations 2011<br>Legislation QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws</u><br>Codes of Practice QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice</u><br>Legislation ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u><br>Codes of Practice ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Victoria<br>Octopational Health at Safety Act and 4<br>Octopational Health and prfetvingulations 2017<br>Legistron VIC: <u>https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-<br/>gulations</u><br>of thes of mactice VIC <u>extps://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice</u>                                                     |  |  |  |  |  |
| New South Wales         Work Health and Safety Act 2011         Work Health and Safety Regulations 2017         Legislation NSW: <a href="https://www.safework.nsw.gov.au/legal-obligations/legislati-codes">https://www.safework.nsw.gov.au/legal-obligations/legislati-codes</a> codes of Practice NSW: <a href="https://www.safework.nsw.gov.au/resource-library/lis">https://www.safework.nsw.gov.au/legal-obligations/legislati-codes</a> codes of Practice NSW: <a href="https://www.safework.nsw.gov.au/resource-library/lis">https://www.safework.nsw.gov.au/legal-obligations/legislati-codes</a> codes of Practice NSW: <a href="https://www.safework.nsw.gov.au/resource-library/lis">https://www.safework.nsw.gov.au/resource-library/lis</a> <a acts-and-regulations"="" href="https://www.safework.nsw.gov.gov.gov.gov.gov.gov.gov.gov.gov.gov&lt;/td&gt;&lt;td&gt;Western Australia&lt;br&gt;Work Health and Safety Act 2020&lt;br&gt;Work Health and Safety Regulations 2022&lt;br&gt;Legislation Western Australia: &lt;u&gt;https://www.commerce.wa.gov.au/worksafe/legislation&lt;/u&gt;&lt;br&gt;Codes of Practice WA: &lt;u&gt;https://www.commerce.wa.gov.au/worksafe/codes-practice&lt;/u&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Northern Territory&lt;br&gt;Work Health and Safety (National Uniform Legislation) Act 2011&lt;br&gt;Work Health and Safety (National Uniform Legislation) Regulation 2011&lt;br&gt;Legislation NT: &lt;u&gt;https://worksafe.nt.gov.au/laws-and-compliance/worplace-serv-laws&lt;/u&gt;&lt;br&gt;Codes of Practice NT: &lt;u&gt;https://worksafe.nt.gov.au/formed-resourcest/compliance/worplace-serv-laws&lt;/u&gt;&lt;/td&gt;&lt;td&gt;Safe Work Australia Links&lt;br&gt;Law and Regulation (All States): &lt;u&gt;https://www.safeworkaustralia.gov.au/law-and-regulation&lt;/u&gt;&lt;br&gt;Model Codes of Practice: &lt;u&gt;https://www.safeworkaustralia.gov.au/resources-publications/model-&lt;/u&gt;&lt;br&gt;&lt;u&gt;codes-of-practice&lt;/u&gt;&lt;br&gt;Model Codes of Practice&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;South Australia&lt;br&gt;Work Health and Safety Act 2012 (SA)&lt;br&gt;Work Health and Safety Regulations 2012 (SA)&lt;br&gt;Legislation for SA: https://www.safework.sa.gov.au/resources/legislation&lt;br&gt;Codes of Practice for SA: https://www.safework.sa.gov.au/work_dces/codes-of-practice#COPs&lt;/td&gt;&lt;td&gt;&lt;ul&gt; &lt;li&gt;Managing noise and preventing hearing loss at work&lt;/li&gt; &lt;li&gt;Confined spaces&lt;/li&gt; &lt;li&gt;Labelling of workplace hazardous chemicals&lt;/li&gt; &lt;li&gt;Managing risks of hazardous chemicals in the workplace&lt;/li&gt; &lt;li&gt;Welding processes&lt;/li&gt; &lt;/ul&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;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: &lt;a href=" https:="" laws-and-compliance="" topics="" worksafe.tas.gov.au="">https://worksafe.tas.gov.au/topics/laws-and-compliance/acts-and-regulations</a> Codes of Practice for TAS: <a href="https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice">https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice</a> | <ul> <li>First aid in the workplace</li> <li>Managing the risk of falls at workplaces</li> <li>Hazardous manual tasks</li> <li>Managing the risk of falls in housing construction</li> <li>Managing electrical risks in the workplace</li> <li>Demolition work</li> <li>Excavation work</li> <li>Work health and safety consultation, cooperation and coordination</li> </ul> |  |  |  |  |  |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <ul> <li>Work health and safety consultation, cooperation and coordination</li> <li>Managing the work environment and facilities</li> <li>How to manage work health and safety risks</li> <li>Managing risks of plant in the workplace</li> <li>Construction work</li> </ul>                                                                                                  |  |  |  |  |  |



#### 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 gualifications 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.

| Worker Name | Signature | Date |
|-------------|-----------|------|
|             |           |      |
|             |           |      |
|             |           |      |
|             |           |      |
|             |           |      |
|             |           |      |

#### SAFE WORK N THE ST ATEM ANT MONITORING AND REVIEW

d must reviewed (and

hav be sted by the operation

should be carried out in

The SWMS must be reviewed regularly to make sure it remains fective revised if necessary) if relevant control measures are revised. The viewn consultation with workers (including contractors htractors of the SWMS and their health and safety representatives who represented that work group at the workplace.

When the SWMS has been revised the PCBU must ensure that persons involved with the work are advised that a revision has been made and how they can acces he revised SWMS, including all persons who will need to change a work procedure or system as a region of the review are advised of the changes in a way that will enable them to implement their duties antly 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 them to understand and implement the revised SWMS.

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 that the PCBU is consistently developing ever-improving systems of safe work principles.

| 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   | COMMENTS       |  |
|---------------------------------------------------------------------------------------------------|-------------|----------------|--|
|                                                                                                   |             |                |  |
| The company details have been entered, including the project name and address.                    |             |                |  |
| All relevant personnel consulted during the development of the SWMS.                              |             |                |  |
| Name, signature, position and date signed of the person approving the SWMS.                       |             |                |  |
| Specific personnel and qualifications, experience is noted in the SWMS.                           |             |                |  |
| 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.                            | $\boxtimes$ |                |  |
| Foreseeable hazards are identified and documented for each step.                                  | $\boxtimes$ |                |  |
| Any hazards listed in any site risk assessments have been added to the SWMS                       | $\boxtimes$ |                |  |
| SWMS initial risk (IR) column as well as residual risk (RR) column mpleted.                       | $\boxtimes$ |                |  |
| Check control measures added to the SWMS are the most effective selections                        | $\boxtimes$ |                |  |
| Responsible person is assigned and listed on the part the importation control measures.           | $\boxtimes$ |                |  |
| Permit or licenses requirements specified, su as Hot Work, Electric Work, Work at Heights etc.    | $\boxtimes$ |                |  |
| SWMS identifies plant and equipment to be use                                                     | $\boxtimes$ |                |  |
| Details of inspection checks required for any equipment listed protection on the SWMS.            | $\boxtimes$ |                |  |
| Describes any mandatory qualifications, experience, and g or skills required to perform the work. | $\boxtimes$ |                |  |
| Applicable personal protective equipment is selected on the SWMS.                                 | $\boxtimes$ |                |  |
| Reflects and documents any legislative references and/or Australian Standards.                    | $\boxtimes$ |                |  |
| Identifies any hazardous substances used with specific control measures in line with any SDS.     | $\boxtimes$ |                |  |
|                                                                                                   |             |                |  |
| REVIEWED BY                                                                                       | DATE RE     | VIEWED         |  |
| SIGNATURE                                                                                         | DATE COM    | DATE COMPLETED |  |