

CNC Laser Cutter	SAFE WORK METHOD ST	ATEMENT (SWMS)	
TA	SK OR ACTIVITY: CNC Laser Cu	tter	
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	THE POST THE PROJECT	
Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.	cting a business or undertaking (N 3U) is	required to ture 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 agislative requirements to first identify any site hazards, conditions those hazards and then to further take steps to either the conditions of the conditions are conditionally as a condition of the condition	NAME	SIGNATURE	DATE
If an incident or a near miss occurs, all work must steam ately. 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.			

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	CLIENT OR PRINCIPAL CONTRACTOR DETAILS										
Client:						SCOPE OF WORKS					
Project Name:					Provide a detailed description of the specific work being carried out (otherwise						
Project Address:					known as cope of works).						
Project Manager:											
Contact Phone:											
Project Manager Sig	nature:										
Date SWMS supplie	d to Project Manager:										
ANY HIGH-RISK CON PUCT NO JRK BEING CARRIED OUT											
☐ involves a risk of a pe	erson falling more than 2 m	neters.		is carried out on or near pressurised gas mains or piping.							
is carried out on a tel	ecommunication tower.		M + M	is carried out on	or near chemical, fuel or refrig	erant lines.					
☐ involves demolition o	f an element of a structure	that is load-be n.		is carried out on or near energised electrical installations or services.							
☐ involves demolition o	f an element related to the	physical integrit of a str	3.	is carried out in an area that may have a contaminated or flammable atmosphere.							
☐ involves, or is likely to	o involve, disturbing a	tos.		☐ involves tilt-up or precast concrete.							
involves structural alt	eration or repair that re	upp to p	prevent collapse.	is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor.							
is carried out in or ne	ar a confined space.			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 th	nan 1.5m or tunnel involvin	g use of explosives.	is carried out in a	areas with artificial extremes of	temperature.					
is carried out in or ne	ar water or other liquid tha	t involves a risk of drowning	ng.	☐ involves diving w	vork.						
		ANY HI	IGH-RISK MACHINER	RY OR EQUIPMEN	IT 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 -					

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PERL NAL TECTIVE EQUIPMENT (PPE)

FOOT PROTECTION	HAND PROTECTION	HEAD PROTECTION	HEARING PPOTECTION	PROTE	SPIRATORY P STECTION	FACE PROTECTION	HIGH-VIS CLOTHING	PROTECTIVE CLOTHING	FALL PROTECTION	SUN PROTECTION	HAIR/JEWELLERY SECURED
			A								

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	Equipment malfunction, Electrical hazards	2M	 Regularly inspect and maintain the CNC laser cutter to prevent equipment malfunction. Provide a thorough operator training for all works who will use the CNC laser cutter to ensure they understand proper having and machine safety procedures. Ensure the machine is properly grounded an connected to residual current devices (RCDs) in order to minimise electrical and to residual current devices (RCDs) in order to minimise electrical and to residual current devices (RCDs) in order to minimise electrical and to residual current devices (RCDs) in order to minimise electrical and to residual current devices (RCDs) in order to minimise electrical and to residual current devices (RCDs) in order to minimise electrical and to residual current devices (RCDs) in order to minimise electrical and to residual current devices which can be easily accessed by the operation and emergency so the easily accessed by the operation of the machine to shield workers from potential and separates and epith at a safe and ce. Require works to wear opportate and all protective equipment (PPE) such as safet asses, were an hearing protection while operating the CNC laser cutter. Developend many in standard operating procedures (SOPs) for the preparation and us here the CN laser cutter, including safe machine functionality and emerge by an town a cedures. Stabilis a round emaintenance schedule for the CNC laser cutter, ensuring machine and unthorised person responsible for supervising the use of the CNC are cutter and enforcing safe work practices. Keep the workspace clean and free of debris or loose materials that could interfere with the machinery and create a hazard. Implement proper ventilation systems in the workspace to control any hazardous fumes or emissions from the CNC cutting process. Clearly display warning signs around the CNC laser cutter area indicating potential hazards, such as sharp edges and high voltage equipment. Routinely check the mach	1L	
2. Material Handling	Manual handling injuries, Forklift hazards	ЗН	 Conduct manual handling training for all staff involved in material handling, focusing on proper lifting techniques and posture to prevent injuries. Implement a buddy system where two or more workers are required to lift heavy materials, distributing the load amongst them. Use mechanical aids, such as trolleys or pallet jacks, when moving heavy or bulky items to minimise physical strain on workers. 	2M	



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			 Clearly mark designated walkways and no-go zones within the workspace, separating pedestrian and forklift traffic areas to reduce risk of collisions. 		
			- Ensure all forklift operators hold valid licenses, by received adequate training, and are competent in safe operation.		
			- Regularly inspect and maintain forklifts are other lifting suipment, adhering to a pre-check procedure before use to ensure example of a safe condition.		
			- Develop and implement clear communication cocols for material handlers and forklift operators to discuss netweent plans and mal interests, minimising miscommunication hazards.		
			- Establish and string on the set of limits for forklifts operating within the workplace, air and to reduce the rise of accident to de to excessive speed.		
			- Keep works, es organi ed and clue, ensuring that materials are stored correction and salely, recogning the chance of trips or falls during handling processes.		
			- Review fety preduces and policies regularly, providing ongoing supervision and monitoning worker adherence to protocols, making corrections and improvement where the essary.		
			- E. yre poper training and induction are provided for all personnel operating the CNC is continuously with emphasis on machine safety and entanglement prevention. Spect the workspace surrounding the CNC laser cutter to guarantee clear was ways and sufficient space for workers to safety manoeuvre during set up and		
	G		- Confirm that the emergency stop button is functional and accessible, allowing immediate shut down of the CNC laser cutter in case of an emergency or entanglement.		
			- Verify that safety guards and interlocks are properly installed and working efficiently to minimise the risk of crush injuries during machine setup and operation.		
3. Machine Set Up	Entanglement, Crush in	4A	- Enforce a strict policy requiring workers to wear appropriate personal protective equipment (PPE), including cut-resistant gloves, long sleeves, and closed-toe footwear.	2M	
			- Implement lockout/tagout procedures to control hazardous energy sources while setting up the CNC laser cutter, thus mitigating the potential for accidental activation.		
			- Encourage regular communication among team members to address any emerging concerns, promote safe work practices, and conduct thorough pre-start meetings before beginning machine set up.		
			- Establish and maintain a preventative maintenance programme for the CNC laser cutter, regularly assessing the condition of the machine and replacing worn components as necessary.		

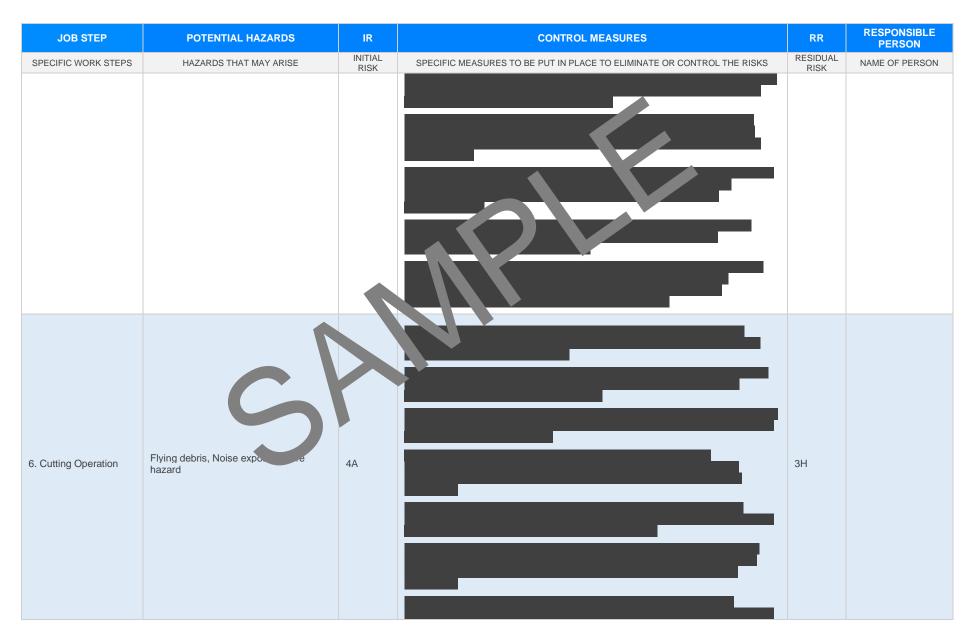


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			- Clearly display signage indicating hazard zones and warning workers about risks associated with CNC laser cutter operations, such as entanglement and crush injury hazards.		
			- Foster a culture of safety in the workplace by a moting incident reporting, conducting risk assessments, and reinforcing the importance of adhering to established safe work procedures.		
4. Programming	Incorrect parameters, Eye strain	2M		1L	



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5. Lens Inspection	High-pressure gas release Optics radiation	ЗН		2M	







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7. Positioning Workpiece	Pinch points, Sharp edges	ЗН		1L	



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8. Path Checking	Collision with objects/people, Slips/trips/falls	2M		1L	



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9. Material Removal	Burns from hot materials, Manual handling injuries	ЗН		2M	



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10. Waste Disposal	Dust exposure, Improper container use	2M		1L	



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11. Finished Product Inspection	Poor lighting, Ergonomic issues	2M		1L	



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12. Maintenance	Exposure to hazardous substances, Electrical hazards	ЗН		2M	



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13. Emergency Actions	Inability to act quickly, Inadequate evacuation plan	2M		1L	



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14. Cleaning & Housekeeping	Chemical exposure, Slips/trips/falls	2M		1L	



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15. Shutting Down	Incomplete procedures, Enclared hazards	ЗН		1L	



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	5				



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

Legislation QLD: 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 201

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

Codes of Practice NT: https://worksafe.nt.gov.au/5

South Australia

Work Health and Safety Act 2012 (SA)

Work Health and Safety Regulations 2012 (SA)

Legislation for SA: https://www.safework.sa.gov.au/resources/legislation

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 afety gulations 2017

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

qulat

tes of 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: https://www.commerce.wa.gov.au/worksafe/legislation

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.

Worker Name	Pos	sition	Signature	Date	Time	Supe	ervisor
				Date:			
				Date			
				L te:			
				Date:			
				Date:			
				Date:			
				Date:			
		SAF WO A	STATEMENT	MONITORING AND R	EVIEW		
The SWMS must be reviewed regularly to pake sure it remains effective and must be reviewed (and revised if necessary) if relevant control measure are subcontracted, are reviewed 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 them to understand and implement the revised SWMS.				effective in reducing the person responsible for memploy a multi-faceted a 1. Spot Checks. 2. Consultation v. 3. Internal audits An approach of continuo followed up by immediate	nitored regularly for the exist of incidents, keeping the onitoring the effectiveness peroach which includes but with workers, contractors at on a continual basis. The improvement, promptly be corrective action and contently developing ever-improvement.	ne workplace safe for all of the Safe Work Method is not limited to: and sub-contractors. recording inconsistencies sultation with all relevan	personnel. The od Statement should statement should so or deficiencies, at personnel ensures
REVIEW NUMBER	<u> </u>	□ 2	□ 3	□ 4	□ 5	□ 6	□ 7
NAME							
INITIALS							
DATE							

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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	
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 SWI			
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.			
Check control measures added to the SWMS are the most effecting secutions.			
Responsible person is assigned and listed on the SWMS for the imperent of contameasures.			
Permit requirements specified, such as Hot Work, Electrical Work, Vocat Heights etc.			
SWMS identifies plant and equipment to be u d.			
Details of inspection checks required for any equipment listed at 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.			
Identifies any hazardous substances used with specific control measures in line with any SDS.			
REVIEWED BY	DATE R	EVIEWED	
SIGNATURE	DATE CO	MPLETED	