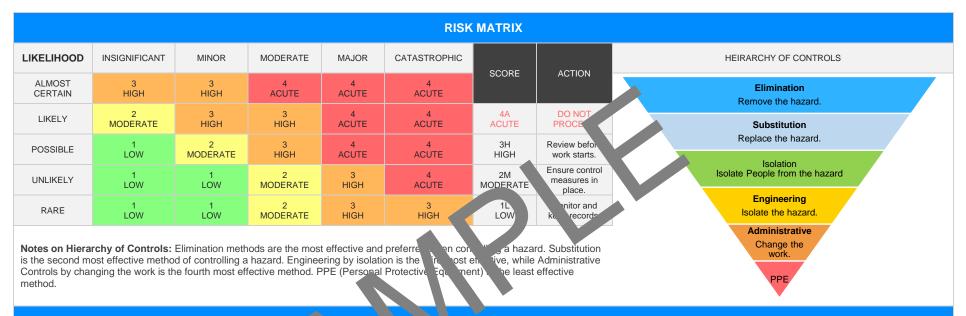


Gas Cutting (Plate Cutting Att	achments) SAFE WORK I	METHOD STATEMENT (SWM	S)
TASK OR ACT	TIVITY: Gas Cutting (Plate Cutting	g Attachments)	
Business Name: [Company Name]		ABN: [ABN]	SWMS#
Business Address: [Company Address]			
Contact Person:	Phone: [Phone]	E fil:	
THIS SAFE WORK METHOD	STATEMENT IS 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 turn 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	compliance 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 B PMENT AND APPROVAL OF THIS SWMS	EEN CONSULTED AND
Safety meetings or toolbox talks will be scheded in accordance with agislative requirements to first identify any site hazards, hazards and then to further take steps to either the schede or continuous those hazards.	NAME	SIGNATURE	DATE
If an incident or a near miss occurs, all work must structured. 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.			



		CLI	ENT OR PRINCIPAL	CONTRACTOR D	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	N' 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.		$H \cap H$	☐ 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	9	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	inporal, 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	ng use of explosives.	is carried out in	areas with artificial extremes o	f temperature.		
is carried out in or ne	ar water or other liquid tha	t involves a risk of drowning	ng.	☐ involves diving v	vork.			
		ANY HI	IGH-RISK MACHINEF	RY OR EQUIPMEN	NT NEARBY			
Forklift	☐ Crane/s	☐ Hoist/s	☐ Excavator	☐ Backhoe/Loade	r 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 -		





PER NAL TECTIVE EQUIPMENT (PPE)

FOOT PROTECTION	HAND PROTECTION	HEAD PROTECTION	HEARING PROTECTION	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	Inadequate PPE, Incorrect equipment setup	2M	 Provide training for workers on the correct setup of equipment and required personal protective equipment (PPE) for gas cutting tasks, including mandatory use of flame-resistant clothing. Ensure that all workers involved in gas cut of operations are wearing appropriate PPE: safety glasses, gauntlet gloves, sturdy, sel-toed tasks, and helmets with suitable eye protection or shields. Conduct regular equipment inspections to verify the proper functionality, assembly, and maintenance of tubing, he as, regulators, and the cut of attachments, making certain they meet the manufact our's specifications. Create a visual checklist applays thear the work area outlining proper equipment setup and PPE vequirement services a reference and reminder for workers engaged in groutiting processes. Describe a worder chealth and safety officer to supervise the execution of gas cutting as, ensured that preparation steps are strictly followed, and intervening prompts in these of contractly assembled equipment or lack of PPE. Implement and dys, as meter for gas cutting operations, where pairs of workers ross-chick ear other's equipment setup and PPE before initiating any cutting to microsise tellikely ood of errors. Makes othat the workspace is well-ventilated and free of combustible materials accidental ignition sources to prevent fire hazards during gas cutting operations. Evablish a procedure for regular communication between management and workers concerning equipment upgrades, changes in PPE guidelines, and any incidents related to incorrect equipment setup or insufficient protection. Schedule routine audits to assess adherence to established control measures regarding equipment setup, worker training, and PPE compliance, ensuring continuous improvement and risk reduction. Encourage an open reporting culture, empowering workers to voice concerns about incorrect equipment setup or inadequate PPE without fear of retribution, promoting a collect	1L	
2. Pre-inspection	Faulty equipment, Inadequate training	3Н	 Regular equipment maintenance: Conduct frequent inspections and repairs of gas cutting equipment to ensure it is in proper working condition, minimising the risk of faulty equipment failures. Inspection checklists: Utilise comprehensive pre-inspection checklists to accurately determine if all equipment components are functioning correctly before starting any gas cutting tasks. Staff training: Ensure that all employees involved in gas cutting tasks receive adequate training on equipment handling, safety protocols, and proper use of Personal Protective Equipment (PPE). 	2M	



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
			- Safety guidelines and documentation: Provide up-to-date and accurate safety guidelines and documentation for employees to consult while performing gas cutting duties, mitigating potential risks from inadequate training.		
			- PPE provision and enforcement: Supply appreciate PPE to all workers and enforce strict adherence to wearing it throughout the gas cutting process.		
			- Supervision and monitoring: Appoint a complent survisor to closely monitor workers during the pre-inspection phase and a complex any issues or concerns immediately.		
			- Safe work practices reinforce ont: Continuously a phase the importance of following established work actices when condering pre-inspections and gas cutting operation		
			- Employee has assess and: Very hat an employee assigned to gas cutting tasks in physic of fit and be from any martions that could impair their ability to perform ese takes by.		
			- Accidence d near hiss reporting and investigation: Encourage staff members to report lesidents and a roughly investigate any accidents or near misses to prevent recurring problems.		
	•		perge by produres and first aid availability: Implement an effective emergency response an, with all necessary first aid equipment readily available and accessible pempiles.		
			ol and equipment storage: Properly store and maintain gas cutting tools and equipment when not in use, reducing potential hazards from faulty or damaged items.		
			- Clear communication channels: Establish clear lines of communication between employees and management to facilitate discussions about equipment concerns or other safety-related issues.		
			- Breakdown procedures: Clearly outline steps to follow in the event of faulty equipment, including when to stop work, how to secure the area, and who to notify for further assessment.		
			- Continuous improvement and review: Regularly evaluate existing control measures and workplace safety guidelines, making necessary adjustments as required to optimise worker protections from hazards associated with pre-inspection and gas cutting tasks.		
3. Gas cutting setup	Gas leaks, Fire hazards	3H	- Regular inspection and maintenance of equipment: Ensure that all gas cutting equipment, including hoses, regulators, torches, and cylinders, are inspected regularly for any signs of damage or wear. Any faulty equipment must be repaired or replaced immediately to prevent gas leaks and fire hazards.	1L	
			- Proper storage of gas cylinders: Store gas cylinders in a well-ventilated area away from sources of heat and ignition. Keep cylinders secure and upright to prevent them from falling and causing gas leaks.		



6

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
			 Use of flash arrestors: Install flash arrestors on the torch and the regulator to prevent reverse flow of gases and flashback, reducing the risk of fire hazards. 		
			- Leak testing: Before starting the gas cutting process, perform a leak test by applying a soapy water solution to all connection within the system. If bubbles form, it indicates a leak that must be fixed before acceeding with the cutting.		
			- Trained personnel: Ensure that only trained and complete the gas cutting equipment. They must be familiar with precautions to minimise risks associated with gas baks and fire azards.		
			- Safe work environment: Clear the area around the attitude peration of any flammable or combust a material, and ensure applicate ventilation to dissipate fumes and gaser aim the atting access.		
			- Fire extingular er availabil. Have a appropriate type of fire extinguisher readily available near a gas curing area in a confirmed emergencies involving fire hazards.		
			- Person protect equipment (PPE): Provide workers with suitable PPE, such as flame-six int closers, gloves, safety goggles, and welding helmets. This reduces the risk of its vidue exposure to flames, sparks, and hot metal pieces generated during to gas sutting a cess.		
			nerge cy pla Develop and communicate emergency response plans, including action to take in case of a gas leak or fire. Regularly train employees to ensure they re fam. with the plans and can respond swiftly and effectively in an emergency lation.		
			- Puper shutdown procedures: Instruct workers on the proper steps to follow when shutting down equipment after the gas cutting process, including closing cylinder valves, releasing gas from hoses, and properly storing equipment. This reduces the risk of gas leaks and fire hazards associated with improper or careless shutdown procedures.		
4. Plate positioning	Heavy lifting, Slips and trips	2M		1L	



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
5. Cutting process	Burns and sparks, Inhalation of fumes	2M		1L	



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	PERSON NAME OF PERSON
6. Equipment adjustment	Incorrect settings, Malfunctioning equipment	2M		1L	



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
7. Monitoring cuts	Bad visibility, Splinter injuries	2M		1L	



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
				NGK -	



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
8. Grinding cut edges	Flying debris, Noise exposure	2M		1L	
9. Plate removal	Lifting injuries, Collision with equipment	3H		2M	



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
10. Cool down	Burn risks, Improper handling	2M		1L	



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
11. Post-cut inspection	Sharp edges, Moving parts hazards	2M		1L	



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
12. Equipment shutdown	Equipment malfunction or damage, Gas leakage	3H		1L	



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



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.gld.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 codes-of ractice NSW: https://www.safework.nsw.gov.au/resource-library/lis codes-of-ractice NSW

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/f

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/le_lation

Codes of Practice for SA: https://www.safework.sa.gov.au/wor 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 al. Safety Act

Occupational Health and afety gulations 2017

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

gulat

des on actice VI autros://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	Su	pervisor	
				Date:				
				l te:				
			AV	Date:				
				Date:				
				Date:				
				Date:				
	SAF WO A STHED STATEMENT MONITORING AND REVIEW							
The SWMS must be reviewed regularly to the ke sure it remains efficitive and must be reviewed (and revised if necessary) if relevant control measure and course 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 recessented 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.			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	<u> </u>	□ 2	□ 3	□ 4	□ 5	□ 6	□ 7	
NAME								
INITIALS								
DATE								



SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

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

ITEMS WHICH MUST BE INCLUDED IN THE SWMS	COMPLETED	TO BE DONE	COMMENTS
The company details have been entered, including the project name and address.			
Names and signatures of all relevant personnel consulted during the development of the SWMS.		D)	
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.			
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 effections.			
Responsible person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person person is assigned and listed on the SWMS for the imperent person per			
Permit requirements specified, such as Hot Work, Verall Work, Verall 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	