Nailing Tools (Gas Pow	ered) SAFE WORK METH	DD STATEMENT (SWMS)		
TASK O	OR ACTIVITY: Nailing Tools (Gas F	Powered)		
Business Name: [Company Name]		ABN: [ABN]	SWMS#	
Business Address: [Company Address]				
Contact Person:	Phone: [Phone]	E Bil:		
THIS SAFE WORK METHOD	STATEMENT IS APPROVED BY	THE P OF THE PROJECT		
Under the Work Health and Safety Regulation (WHS Regulation), a person conductive proposed work starts.	icting a business or undertaking (k 3U) is	required to ture that a safe work method s	statement (SWMS) is prepared before	
Full Name:				
Signature:		Title:	Date:	
Contact Person: Phone: [Phone] Enail: THIS SAFE WORK METHOD STATEMENT IS APPROVED BY THE PLO OF THE PROJECT Under the Work Health and Safety Regulation (WHS Regulation), a person conducting a business or undertaking (NBU) is required to sure part a safe work method statement (SWMS) is prepared before the proposed work starts. Full Name:				
Full Name:		Title:	Phone:	
			EEN CONSULTED AND	
requirements to first identify any site hazards, conduction unical those	NAME	SIGNATURE	DATE	
on the severity of the incident, a meeting will be called with all workers to amend				
Business Name: [Company Name] ABN: [ABN] SWMS# Business Address: [Company Address] E E Contact Person: Phone: [Phone] E all: THIS SAFE WORK METHOD STATEMENT IS APPROVED BY THE PLOY OF THE PROJECT Under the Work Health and Safety Regulation (WHS Regulation), a person conducting a business or undertaking (k-RU) is required to a safe work method statement (SWMS) is prepared be the proposed work starts. Full Name: Full Name: Title: Date: Obtails of the person(s) responsible for ensuring implementation, monitoring and compliance if the SWMS well as reviews and modifications of the SWMS. Full Name: Full Name: Title: Phone: ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS VMS. Title Phone: Safety meetings or toolbox talks will be scheed of in accordance with regulation will stress those between will workers to an ear miss occurs, all work must stress or on the set will workers to an ear miss occurs, all work must stress or on the set will worker to an ear miss occurs, all work must stress or on the set will be called with all workers to an ear miss occurs, all work must stress or on the set will be called with all workers to an ear miss occurs, all work must stress or on the set will be called with all workers to an ear miss occurs, all work must stress or on the set will be called with all workers to an ear miss occurs, all work must stress or on the set will of the incident or a near miss occurs, all workers tor on the set will be called with all workers to an ear				
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				



CLIENT OR PRINCIPAL CONTRACTOR DETAILS											
Client:					SCOPE OF WORKS						
Project Name:							rk being carried out (otherwise				
Project Address:			k	nown as scope of works).							
Project Manager:											
Contact Phone:											
Project Manager	Signature:										
Date SWMS supp	olied to Project Manag	er:									
		ANY HIG	H-RISK CON JUCI	N. JRK BEING	ARRIED OUT						
involves a risk of	a person falling more than	2 meters.		is carried out on or near pressurised gas mains or piping.							
is carried out on a	a telecommunication tower.			☐ is carried out on or near chemical, fuel or refrigerant lines.							
involves demolition	on of an element of a struct	ure that is load-be		☐ is carried out on or near energised electrical installations or services.							
involves demolition	on of an element related to	the physical integrit of a s	17 e.	is carried out in an area that may have a contaminated or flammable atmosphere.							
involves, or is like	ely to involve, disturbing a	estos.		involves tilt-up or precast concrete.							
involves structura	al alteration or repair that re	mporal upp to	prevent collapse.	is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor.							
is carried out in o	r near 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/n	ear a shaft or trench deepe	er than 1.5m or tunnel involv	ving use of explosives.	is carried out in areas with artificial extremes of temperature.							
is carried out in o	r near water or other liquid	that involves a risk of drow	ning.	involves diving wo	k.						
		ANY	HIGH-RISK MACHINE	RY OR EQUIPMENT	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 -					







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	Incorrect tool selection, Inappropriate work area		 Training and Induction: Ensure all workers who will be using gas-powered nailing tools have received adequate training, including count tool selection, application, and safe operation of the devices. This should all unclude awareness on potential hazards associated with their use. Pre-Use Inspection: Perform a thorough in vaction of the powered nailing tools before starting any work. This should include vacking or damaged or worn parts, ensuing proper assembly and alignment, and vacying that the fiel cartridge is correctly installed and function use. Approved Tools: Only use approved, compliant too of up porating internal safety mechanisms design on unimits tisks associated with incorrect selections or accidental disolatinges. The lovice ust meet Av alian Standards and manufacture recommenciences. Word rea AS ussment evaluate the onk area prior to commencing operations, ensure dequary using, ventilation, and no tripping hazards or obstructions are prese. It honove to accessary materials and items from the designated space to minimit thrusts of a idents. Tool Stactic Choos the appropriate nail gun based on the material being thened in divide gases, gloves, hearing protection, and steel-toed boots to mitigate injuries in case of an incident. Ensure PPE is in good condition and fits properly. Gas Cartridge Handling: Store and handle fuel cartridges according to manufacturer instructions, keeping them away from direct sunlight, heat sources, or sparks. Dispose of used or damaged containers following local regulations and guidelines. Clear Work Surfaces: Maintain clean and organised work surfaces to reduce the risk of unexpected movement of forceful contact with the nailing tools to prevent unauthorised use, accidental discharge, or damage to the tool. This may include lealing the device in a protective case or locking it away in a designated storage area. Communication and Reporting: Establish clear channels of communication among team members	2М	



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2. Equipment Inspection	Malfunctioning equipment, Damaged gas canisters	4A	 Regularly inspect and maintain tools and equipment, ensuring they are in good working condition before use. Check for any signs of wear, damage, or malforation, paying particular attention to gas canisters and their connections. Ensure all operators have been appropriate drained on the safe use and handling of gas-powered nailing tools and associated excernt. Implement a pre-use inspector checklist to be completed brace operator prior to commencing work. Immediately remarkation amage for faulty equipment from the worksite and report the issue throaten appropriate characts. Store gas can ters safely and secure using from sources of heat, flame, and impacts preventote or nazards. Farm any yours with the manufacturer's instructions and safety guidelines for all equipment using usin including proper usage, storage, and disposal. Use of approved gas paristers for your specific tool to avoid compatibility issues ind potential activents. Ensure that adequate ventilation is in place when using gas-powered nailing tools, is this by not equipment may produce harmful fumes. Assign a designated team member to regularly monitor tool operation and performance, identifying potential hazards early on. Establish a scheduled maintenance programme for all gas-powered nailing tools and ensure it is being consistently followed. Regularly communicate safety guidelines and best practices within the team, reinforcing the importance of adhering to established protocols. Encourage employees to report any concerns or issues related to the gas-powered nailing tools or their use, creating a proactive culture of safety. 	2M	
3. Loading Gas Canister	Gas leakage, Accidental triggering of tool	ЗН	 Ensure workers are trained and competent in the proper handling and loading of gas canisters to minimise potential risks associated with gas leakage or accidental triggering of tools. Follow the manufacturer's guidelines for the specific nailing tool being used, including recommendations for gas canister compatibility, storage, and handling. Conduct a thorough inspection of the gas canister for any signs of damage or defects prior to use. Do not use a damaged or leaking canister. Ensure that the work area is well-ventilated to mitigate the risk of exposure to harmful gases due to leakage from the canister. 	1L	



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			- Workers should use appropriate personal protective equipment (PPE), including safety glasses and gloves during the process of loading gas canisters.		
			- Always load the gas canister with the nailing tool connected from its power source to prevent accidental triggering of the t		
			- Install gas canisters using slow, controller ovements to educe the potential for accidental discharge of gas or damage to the unister cal.		
			- Double-check gas canister connections to ensure they are promerly secured before re-attaching the power source to the nailing tool.		
			- Establish an exclusion zone around the worker load and the canister to maintain a safe distance between the worker and others on-site during the process.		
			- Communicative with other to m men version of in the vicinity, making them aware of the potential azards are clated with a range the gas canister to avoid surprise-trigger accidents.		
			- Implicity a wonthice procedure for regularly checking and maintaining gas- powerk in a rig tool, the ensure their safe operation and optimal performance.		
			- Store cluse cas can bers upright in a cool, dry, well-ventilated location away from ect surright a scheat sources.		
	1		- En. (e) y response plans should be established to address incidents involving as leak or accidental triggering of tools, ensuring that all team members are are of the proper course of action in such situations.		
	G				
		F			
4. Tool Positioning	Unstable footing, Misaligned nail placement	2M		1L	



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5. Nail Firing	Flying debris, Unintended nail discharge	ЗН		1L	

Version 2.5



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6. Work Area Maintenance	Cluttered work area, Slipping hazards	2M		1L	

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7. Equipment Cleaning	Exposure to chemicals, Sharp edges	2M		1L	

Version 2.5



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8. Gas Canister Disposal	Gas leakage, Explosion hazard	3H		1L	



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9. Tool Storage	Improper storage, Unauthorised access	2M		1L	



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10. Emergency Response	Inadequate first aid, Delay in response			1L	

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11. Breaks & Rest Periods	Fatigue, Tripping durt tool	₽M		1L	

Version 2.5



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12. Finishing Work	Incomplete safety neck, Leftover materials	2М		1L	

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EMERGENCY RESPONSE – CALL 000 FOR EMERGENCIES

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

LEGISLATIVE F	REFERENCES					
RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES ANY STATE AT ARE NOT APPLICABLE						
Queensland & Australian Capital Territory Work Health and Safety Act 2011 Work Health and Safety Regulations 2011 Legislation QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws</u> Codes of Practice QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice</u> Legislation ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u> Codes of Practice ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u>	Victoria Octupational Health an Safety Acta 04 Octupational Health and onfety regulations 2017 Legistron VIC: <u>https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and- gulatupes</u> Codes of mactice VIC <u>attps://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: <u>https://www.safework.nsw.gov.au/legal-obligations/legislations/legis</u>	Western Australia Work Health and Safety Act 2020 Work Health and Safety Regulations 2022 Legislation Western Australia: <u>https://www.commerce.wa.gov.au/worksafe/legislation</u> Codes of Practice WA: <u>https://www.commerce.wa.gov.au/worksafe/codes-practice</u>					
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/workplace-serve-laws Codes of Practice NT: https://worksafe.nt.gov.au/formed-compliance/workplace-serve-laws Codes of Practice NT: https://worksafe.nt.gov.au/formed-compliance/workplace-serve-ser	Safe Work Australia Links Law and Regulation (All States): <u>https://www.safeworkaustralia.gov.au/law-and-regulation</u> Model Codes of Practice: <u>https://www.safeworkaustralia.gov.au/resources-publications/model- codes-of-practice</u>					
South Australia Work Health and Safety Act 2012 (SA) Work Health and Safety Regulations 2012 (SA) Legislation for SA: <u>https://www.safework.sa.gov.au/resources/legislation</u> Codes of Practice for SA: <u>https://www.safework.sa.gov.au/work_saces/codes-of-practice#COPs</u>	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					
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/codes-of-practice Codes of Practice for TAS: https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice	 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 					
Details of permits, licenses or access required by regulatory bodies (add or delete as required): - Permits from local council - Authorisation to commence 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 					

- Any required documents.



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	Position	Signature	Date	Time	Supervisor
			Date:		
			Datu		
			ı te:		
			Date:		

SAF WC A STHUD STATEMENT MONITORING AND REVIEW

The SWMS must be reviewed regularly to revised if necessary) if relevant control measure are subcontract of the SWMS and their health and safety representatives who reworkplace.

ke sure it remains effective and must be reviewed (and acception of the process should be carried out in s any subcontract s) who may be affected by the operation esentatives who recented that work group at the

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	1	2	3	4	5	6	7
NAME							
INITIALS							
DATE							

SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

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

ITEMS WHICH MUST BE INCLUDED IN THE SWMS	COMPLETED	TO BE DONE	COMMENTS
The company details have been entered, including the project name and address.			
Names and signatures of all relevant personnel consulted during the development of the SWMS.		P	
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 SWh			
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.			
Check control measures added to the SWMS are the most effectine sections.			
Responsible person is assigned and listed on the SWMS for the impement of continue measures.			
Permit requirements specified, such as Hot Work, Electrical Work, Vortat Heights etc.			
SWMS identifies plant and equipment to be up t.			
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 RI	EVIEWED	
SIGNATURE	DATE CO	MPLETED	