

Oxy-Fuel Gas Weldir	ng SAFE WORK METHOD	STATEMENT (SWMS)	
TASI	COR ACTIVITY: Oxy-Fuel Gas We	elding	
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 (r 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	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		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 structurately. 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	ETAILS			
Client:						SCOPE OF WORKS		
Project Name:					Provide a detailed description of the specific work being carried out (otherwise known as cope of works).			
Project Address:								
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.	`	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, railwa	ay, shipping lane or other to	raffic corridor.	
is carried out in or ne	ar a confined space.			is carried out in a	an area of a workplace where t	here is any movement of p	owered 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 -		





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
			- Regular inspections and maintenance: Ensure all equipment, such as gas cylinders, hoses, and torches, are regularly inspected and well-maintained to prevent leaks, damage, or malfunction.		
			 Workspace organisation: Maintain a clean and organised workspace, ensuring adequate space for movement around the volting areas of proper storage of materials and equipment. 		
			- Appropriate signage: Clearly mark designated that areas with arning signs, indicating potential hazards in "flammable gas," the work progress," or "welding area."		
			- Removal of corpositibles feep a mable and combustible materials away from the welding count to reduce e risk to re.		
			- Equir pent of tation: Sition gas of the same regulators securely and upright on care brack pring them away from direct sunlight, extreme temperatures, and so have refer to the same regulators.		
1. Preparation	Poorly maintained equipment, Insufficient workspace	2M	- Proper velocition: Let ure effective natural or mechanical ventilation to minimise inhalatic of heres, values, and gases produced during oxy-fuel gas welding.	1L	
			e pre-ention, uipment: Keep appropriate firefighting equipment, such as fire extinctist is or sand buckets, nearby and easily accessible in case of an merge.		
			- rsonal Protective Equipment (PPE): Require all workers in the welding area to wear appropriate PPE, including welding masks, gloves, flame-resistant clothing, and safety footwear.		
			- Training and Competency: Provide comprehensive training to all workers involved in oxy-fuel welding tasks to ensure understanding of safety procedures, hazard recognition, and correct equipment usage.		
			 Safe storage of gas cylinders: Store gas cylinders securely when not in use, comply with local regulations, and ensure that full cylinders are separated from empty ones, preventing inadvertent mixing. 		
			- Emergency response plan: Develop and communicate a clear emergency response plan, so workers know how to safely respond to incidents such as fires, leaks, or equipment malfunctions within the welding area.		
Setup area	Fire hazards, Tripping hazards	2M	- Conduct a thorough inspection of the work area, removing any combustible materials (e.g., paper, wood, oil, and flammable liquids/gases) to create a safe zone around the welding site.	1L	
			- Ensure that the work area is well-ventilated and free from any potential trip hazards such as hoses, cables, and loose tools. Setup the oxy-fuel gas welding workstation on flat, stable ground to minimise the risk of equipment tipping over.		



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			 Use non-flammable screens or barriers to shield the welding area from external sources of ignition or sparks and to protect nearby workers who may be performing other tasks. Be sure to position fire extinguishers within class proximity of the work area. All workers should be familiar with their location and how to onerate them in case of an emergency. Keep fire-resistant blankets or mats on hand a readily accessible for immediate use in case a fire hazard occres. Have a design and storage plans for these materials when not in use. Train all workers in the line the xy-fuel gas welding access on safety procedures, inchesting proximate at handling, equipment setup, and emergency response proteols to ensu that their eawards after responsibilities in maintaining as fe working ovironme. Est and and correct no smoking policy in and around the work area. Design to pecific the as for smoking that are far away from the welding or cutting processes. Inspect all his as, regulators, and torches for signs of wear or damage prior to each hift. Reference as damaged equipment immediately to prevent gas leaks or equipment failure during operation. Store anders securely and upright in a well-ventilated and protected area when tinuse. Make sure cylinder caps are replaced, valves tightly closed, and oxygen as fuel gases adequately separated. Implement a clear communication system among workers to foster awareness when a welding job is about to start, is ongoing, or has been completed, to keep everyone informed and reduce the risk of accidental exposure to hazards. Develop an incident reporting procedure as part of your safety management system that ensures all accidents, incidents, near misses, and identified hazards are recorded, investigated, and addressed in a timely manner to continuously improve the overall safety of the work environment. 		
3. Gas cylinder connection	Gas leak, Loose connections	3Н	 Ensure that all gas cylinders are properly stored and secured in upright positions at the designated storage areas before and after use. Inspect the gas cylinder connections regularly for any signs of rust, damage or wear, and replace them if necessary. Keep a safety data sheet (SDS) on hand containing relevant information about the gases being used, including proper handling and storage procedures. Wear appropriate personal protective equipment (PPE), such as gloves and eye protection, when handling gas cylinders and connecting them to the welding equipment. Only trained and qualified personnel should be allowed to handle and connect gas cylinders to the oxy-fuel gas welding equipment. 	2M	



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			 When connecting gas cylinders, ensure they are clearly labelled with the correct type of gas and make certain to connect the right gas cylinders based on their corresponding labels. 		
			- Turn off the regulator valves before connecting ylinders to the welding equipment, and then slowly open the valves to prevent aden pressure surges.		
			- Check for leaks around the cylinder connecting point by applying soapy water or leak detection solution around the joint, and the leak detection solution around the joint are leaked as the leak detection solution around the joint are leaked as the leak detection solution around the joint are leaked as the leak detection solution around the joint are leaked as the leaked are leaked are leaked as the leaked are leaked		
			- Always use an approved conderwrench or span or for condeting and disconnecting gas cylinders, and ding the use of many shift colls such as pliers or adjustable wrenches		
			- Use flashback mestors a check alves in the xy-fuel gas system to prevent dangerous by flow and pointial exposure.		
			- Ensure that are issess of fittings are it good working condition and free from dama are acks to acks that can cause leakage or malfunction.		
			- Regularly induct a tine maintenance and inspections on all oxy-fuel gas welding equipment, in adding to gas cylinders, hoses, regulators and valve connections, as per the leanufacturer's guidelines.		
	•		- Leglop and imprement an emergency response plan in case of gas leaks or other incide. Following the oxy-fuel gas welding process, ensuring that all employees are miliar way its contents and know what action to take.		
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4. Torch setup	Inadequate personal protective equipment (PPE), Malfunctioning torch	2M		1L	
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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. Ventilation setup	Inadequate ventilation, To avexposure	ЗН		2M	



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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
6. Lighting procedure	Incorrect startup sequence, Flashback	ЗН		2M	



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7. Welding operation	Burns, Fumes and gases, Eye damage	зн		1L	



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8. Adjusting pressure and flame	Uncontrolled release of gas, Burns	2M		1L	



SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	DECIDITAL	
				RESIDUAL RISK	NAME OF PERSON
9. Weld endpoint over	erheating, Loss of workpiece stability	2M		1L	



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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. Shutdown procedure	Incorrect shutdown sequence, Release of gas	ЗН		2M	
11. Cool down	Burns from hot materials, Insufficient cool down time	2M		1L	



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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. Cleanup	Tripping hazards, Fire hazards	2M		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 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

 $\textbf{Legislation QLD:} \ \underline{\textbf{https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws}$

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/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 affety 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	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 rake sure it remains effective and must be reviewed (and revised if necessary) if relevant control measure are subcontracted, are valued by the operation of the SWMS and their health and safety representatives who redesented 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	□ 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 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 SWh			
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.			
Check control measures added to the SWMS are the most effecting so tions.			
Responsible person is assigned and listed on the SWMS for the imperent of continue assures.			
Permit requirements specified, such as Hot Work, Veralt Heights etc.			
SWMS identifies plant and equipment to be u d.			
Details of inspection checks required for any equipment listed are 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.			
dentifies any hazardous substances used with specific control measures in line with any SDS.			
REVIEWED BY	DATE R	EVIEWED	
SIGNATURE	DATE CO	MPLETED	