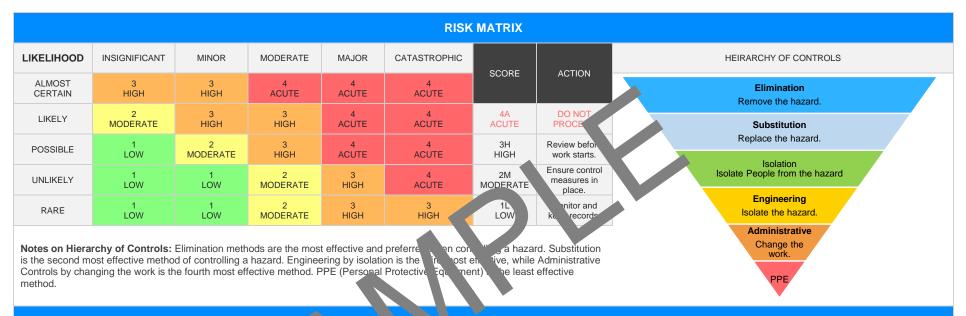


Silica Dust SA	FE WORK METHOD STATI	EMENT (SWMS)	
	TASK OR ACTIVITY: Silica Dust		
Business Name: [Company Name]		ABN: [ABN]	SWMS#
Business Address: [Company Address]			
Contact Person:	Phone: [Phone]	E fil:	
THIS SAFE WORK METHOD	STATEMENT IS APPROVED BY 1	THE PL OF THE PROJECT	
Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.	eting a business or undertaking (F RU) is	required to ure 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 egislative requirements to first identify any site hazards, conditions those hazards and then to further take steps to either the conditions of the conditions are or conditional talks.	NAME	SIGNATURE	DATE
If an incident or a near miss occurs, all work must standardly. 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.			



	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 PUC) NO JRK BEING CARRIED OUT										
☐ involves a risk of a pe	erson falling more than 2 m	neters.		is carried out on	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	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	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	Inhalation of silica dust, Slip and fall hazards	ЗН	 Conduct a risk assessment before commencing work to identify the severity of the hazards and potential exposure levels to silica dust. Develop and implement a site-specific safety or that outlines the necessary precautions and procedures for handling are ranaging silica dust. Ensure proper housekeeping practices are valaced on as regular cleaning of surfaces and equipment to reduce the buildup of a dust. Provide workers with perso of protective equipment (PPE) and ding respiratory masks designed to protect against inhalation of silitant use goggles or safety glasses for eye protection, and assilipment of protective equipment for every masks designed to protect against inhalation of silitant use goggles or safety glasses for eye protection, and assilipment of protective equipment for eye protection, and assilipment of silitant use goggles or safety glasses for eye protection, and assilipment of protective equipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection, and assilipment for eye or safety glasses for eye protection and the protection of the safety glasses for eye protection and safety glasses for eye protection such as safety for protection systems, enclosed works in a safety glasses for eye for eye for eye for eye for protection or specific locations. Establish and maintain walkways and paths within the worksite to help prevent slippend fall accidents related to silica dust accumulation. Provide awareness training for all staff about the hazards associated with silica dust and best practices for preventing slips, trips, and falls in the workplace. Continuously monitor silica dust	2M	
2. Site Setup	Flying debris, Noise pollution	2M	 Enclose the work area with suitable barriers or screens to prevent silica dust and debris from escaping to non-work areas, protecting nearby workers and the public from flying debris. Provide appropriate personal protective equipment (PPE) for workers such as eye protection, earplugs, or earmuffs to ensure their safety from flying debris and noise pollution during site setup. 	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
			 Inspect and maintain tools and equipment on a regular basis to ensure they are in good working condition, minimising potential hazards caused by equipment failure. 		
			- Display clear signage around the worksite to war orkers and visitors about the presence of silica dust and the associated risk onlying debris and noise pollution.		
			- Develop a site-specific induction program for all works involved in the project to ensure they are aware of the hazards, continued es, and emergency procedures in place.		
			- Implement wet cutting techniques and other eng. ering control like local exhaust ventilation systems, where post let, to reduce airbute and dust levels and minimise the risk of " lebris		
			- Schedule we activities a could enerate similar income pollution during period when the error ers are present on-site, reducing overall exposure.		
			- Proper totation confidence of schedule regular breaks to limit their continuous exposite the hazards of silica dust-generated flying debris and noise.		
			- Foster in on a dialog between the management team and workers regarding workplate hear and savety, ensuring any concerns raised are properly addressed a communicate effectively.		
			Monk and review the implemented control measures regularly to evaluate their fectiveness, making necessary adjustments or improvements when needed to exure optimal worker safety throughout the site setup process.		
			- Ensure that all workers are provided with appropriate training on the correct use and operation of tools, including any specific silica dust extraction equipment.		
			- Conduct a thorough risk assessment before selecting tools, considering factors such as power source, vibration levels, and the intended application to minimise exposure to silica dust.		
3. Tool Selection	Incorrect tool use, Electrical hazards	3H	- Choose tools ensuring they have built-in dust control features like HEPA filters, cyclonic action, or water attachment systems to effectively reduce the generation of airborne silica dust particles during work processes.	2M	
			- Regularly inspect all tools, equipment, and extension cords to identify any potential electrical hazards, and repair or replace them promptly if any signs of damage are present.		
			- Always follow manufacturer's guidelines for tool usage, maintenance, and personal protective equipment requirements to reduce risks of injury.		
			- Use ground-fault circuit interrupters (GFCIs) or residual current devices (RCDs) for electrical connections in wet environments or when using electrical tools near water sources to prevent electrical shock.		



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
			- Implement safety procedures for disconnecting and storing tools when not in use, such as unplugging power cord tools and removing batteries from cordless tools to avoid accidental activation.		
			- Encourage workers to take regular breaks are vate job functions to minimise overexertion and repetitive motion injuries to can result from prolonged periods of using certain tools.		
			- Establish a clear communication system betwoen orkers to alert others of potential hazards while using tools, such as verbosignals or virtual cues like flags or signage.		
			- Provide appropriate and practive equipment (a) such as gloves, safety eyewear, and here ag provition to orkers, in addition to respiratory protection like N95 masks (a) spirators it quirect silicant exposure.		
			- Restrict accept to only to ned and accepted personnel in designated work areas when the acquired might be set used to limit potential hazards. - Ensurable per vene attion and air monitoring in the work area to maintain		
			accept the least soft and orne silica dust and to quickly identify and address any issues. Inducting the least soft and reviews of worksite safety policies and procedures to ensure the fall control measures are being effectively implemented and continuously		
			valuate r improvement opportunities.		
	5				
4. Material Handling	Manual handling injuries, Struck by objects	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	Exposure to silica dust, Lacerations	ЗН		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
6. Wet Cutting Method	Mould growth, Damp conditions causing slips	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. Dust Collection	Ineffective dust control, Poor ventilation	ЗН		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
8. PPE Use	Inappropriate PPE, Lack of understanding of PPE usage	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
9. Health Monitoring	Failure to identify symptoms, Inadequate medical support	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
10. Breaks and Rest Periods	Fatigue, Dehydration	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. Equipment Maintenance	Unmaintained tools, Breakdown during operation	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



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. Cleanup	Release of dust particles, Improper waste disposal	3H		2M	



JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES		RESPONSIBLE PERSON
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS		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.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/codes-of-practice Legislation ACT: https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice Legislation ACT: https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice Legislation ACT: https://www.worksafe.act.gov.au/laws-and-compliance/codes-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-syllaws

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 al. Safety Act

Occupational Health and affety gulations 2017

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

<u>Julai.</u>

des on 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 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 receives essented 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.		P A	
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 SWN			
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 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 as a sign of the SWMS for the imperent person is a sign of the SWMS			
Permit requirements specified, such as Hot Work, Veral 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	