

WHS FORM 04: SITE SPECIFIC RISK ASSESSMENT

Scope of works				
Start date		Finish date		Time
Organisation's name			Assessment undertaken by (name)	
Site address			Signature	

If you have identified any of the listed or other potential hazards on the site, you will need to enter a suitable control below to show how you have controlled the hazard(s). If any further hazards are introduced, record them and update the table at the bottom on this page. If you identify any high risk construction work, you require a Safe Work Method Statement. See form 05 (Safe Work Method Statement).

#	Items to consider when conducting a risk assessment
1	Can parking arrangements at the site cause incidents and injuries to any persons?
2	Are there any slips, trips and falls impacting on the safe access and egress?
3	Are there any other trades or activities that may impact on my work safety?
4	Have I communicated with other trades/workers in this area?
5	Are there any amenities for the site? Can the use of amenities affect workers' health due to poor maintenance?
6	Is there a risk of injury due to fall zones and penetrations not being protected? (eg stair voids, roof areas, balconies)
7	Can something fall on me or can I cause something to fall onto someone else?
8	Is there a risk of workers or pedestrians being hit by moving plant and/or motor vehicles?
9	Is there a risk of injury due to impaling hazards not being appropriately protected in the work area? (eg star pickets, reo bars, stacked pallet stack)
10	Is there a risk of injury due to open trenches or excavations?
11	Is there a risk of workers coming in contact with the overhead or underground services?
12	Am I using correct manual handling techniques?

Date	Hazard(s) identified	Actions Taken	By Whom