

Plant Hazard Risk Assessment

Lendlease's Services business



Plant Identification No: _____ Plant Type: _____ Date: _____
 Assessed by: _____ Signature: _____ Company: _____

Potential Hazard	Risk Yes/No	Risk Rating	Identified Appropriate Control Method	Action by	Date Completed
1. Entanglement- can anything become entangled in moving parts?					
2. Crushing/Cutting- can anything be crushed/cut due to: - Unexpected movement of plant - lack of capacity for plant to be slowed - the plant tipping or rolling - being thrown from plant - parts of plant collapsing - coming in contact with sharp objects - other					
3. Striking- can anyone be struck by moving parts due to: - working pieces being ejected - mobility of plant					
4. Falling/Slipping- can anyone fall/slip due to: - lack of proper work platform - poor floor or walking surface - lack of proper stairs/steps - lack of guard rail/hand grips - poor house keeping - other					
5. Ergonomics- can anyone be injured due to: - poorly designed seating - constrained body effort - other					
6. Electrical- can anyone be injured due to: - damaged leads - damaged switches - other					
7. High Temperature- can anyone be burnt due to coming in contact with hot parts:					
8. Other Hazards- can anyone be injured from exposure to: - fumes / noise / sun - other					
9. Operator- have the following areas been addressed: - competency certificate issued - training provided and recorded - operation manual issued					
10. Documentation- can documentation be provided for: - pre-start checks - servicing schedules - maintenance records - manufacturer's Risk Assessment					
11. Could loss of load occur due to? - Breakage of rope - Failure to hook - Breakage of slings or cables - Instability of plant - Incorrect application of plant - Overloading					

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NOISE REPORT

Equipment Type: _____ No. _____

Make and Model: _____

Tested by (Name): _____

Date:...../...../..... Signature

Sound Level Meter Unit Used: _____

Manufactures specified noise level: _____ dbA

Background level: _____ dbA

Results – Operator's Station: _____ dbA High Idle

Equipment Operating: _____ dbA High Idle

Comments: _____

Results by Stander Position:

LEFT _____ dbA RIGHT _____ dbA

FRONT (Equipment) _____ dbA

_____ dbA _____ dbA

At 7 metres from side of equipment – Equipment Operating (High Idle)

Comments: _____

MOBILE PLANT – HAZARD CHECKLIST

Company: _____ Plant No & Type: _____

ITEM	Yes/No	COMMENTS
Access onto machine		
Audible Alarms - Fitted		
Brakes – Foot/Park Brakes Operating		
Dry Hire – Operation manual issued		
Guarding – Moving parts guarded		
Lifting Points – Approved		
Operator instructions		
Operator Training		
Protective Structure – Fitted/type		
Quick Hitch – Independent latching device fitted		
ROPS/FOPS (compliant) or Risk Assessment (to confirm not required)		
Rotating light - Supplied		
Safety Belt Fitted		
Steps – Hand Grips - in place		
Warning Signs		
Wet Hire – Operator certified & pre start checklist issued		Name: Certificate No: Type:
Windows		
Work Platform - Condition		

General Comments:

NAME: _____ SIGNATURE: _____