

HEALTH & SAFETY WORKSHEET

ACTIVITY:

Pump

IDENTIFY RISKS:

Tick the potential risks(s) for this activity:

<input checked="" type="checkbox"/> Slips, trips and falls	<input checked="" type="checkbox"/> Heavy items that could fall	<input checked="" type="checkbox"/> Sharp objects or tools	<input type="checkbox"/> Electrical equipment (incl. power tools)
<input type="checkbox"/> Gas equipment	<input checked="" type="checkbox"/> Machinery (moving parts)	<input type="checkbox"/> Machinery (sparks)	<input type="checkbox"/> Hand tools
<input type="checkbox"/> Toxic fumes and dust	<input type="checkbox"/> Poisonous chemicals	<input type="checkbox"/> Flammable substances	<input checked="" type="checkbox"/> Excessive noise
<input type="checkbox"/> Ladders (heights)	<input checked="" type="checkbox"/> Temperature	<input type="checkbox"/> Fatigue	<input type="checkbox"/> Flames

List any other risks:

RISK CONTROL METHOD:

Write what you will do to eliminate or minimise each risk:

RISK:	WHAT MIGHT HAPPEN:	HOW YOU WILL ELIMINATE:	HOW YOU WILL MINIMISE:
Slipping on oil, water or dirt	land on your back side	by cleaning up messes	by being careful and staying clear of the spill
excessive noise	you might go deaf from loud hammering	by wearing ear protection	staying clear from the loud banging
heavy items	drop heavy item or strain back	by getting help to lift the item	lift with the right technique
temperature	might get heat stroke	by taking or sweat shirts off from work	don't carry out big tasks that will make you sweat