| **Title of job:** | | **Date**: |
| --- | --- | --- |
| **Site**: | **Supervisors/Contractor Managers Name:** | |
| **Specific Area**: | **JHA Team Leaders Name**: | |
| **JHA Team members:** | | |

**Points to remember**

**Remember to drink**

**Hydration Yes/No**

**Housekeeping**

**Is the site clean Yes/No**

**Security/Safety**

**Security of site Yes/No**

**Barracading Yes/No**

**Falling objects Yes/No**

**Considered PPE?**

**Gloves Yes/No**

**Hearing Yes/No**

**Eye wear Yes/No**

**Hard hat Yes/No**

**Other: \_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you need a permit?**

**Isolation Yes/No**

**Hot work Yes/No**

**Confined Space Yes/No**

**Work at Heights Yes/No**

**Live Equipment Yes/No**

**HV Access Yes/No**

**Radiation Yes/No**

**Dig permit Yes/No**

**Thought about the environment?**

**Waste Management Flora/Fauna**

**Spill Kits/Bunding Ground Disturbance**

**Summary of Potential Hazards**

**Electrical Yes/No**

**Mechanical (Crush points) Yes/No**

**Chemical Yes/No**

**Temperature Yes/No**

**Dust or Fume Yes/No**

**Pressure (Air/Water/Gas) Yes/No**

**Manual Handling Yes/No**

**Other workers Yes/No**

**Noise Yes/No**

**Explosives Yes/No**

**Rock Falls Yes/No**

**Working at Heights Yes/No**

**Radiation Yes/No**

**Ignition Sources Yes/No**

**Environmental Yes/No**

**Do you need special Equipment/Tools**

**Include these in the JHA**

**Are the operators qualified & competent to use these items?**

**Yes/No**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **CONSEQUENCE** | | | |
| **PROBABILITY** | Catastrophic | Critical | Marginal | Negligible |
| Frequent | **1.1** | **1.3** | **1.6** | **3.5** |
| Probable | **1.2** | **1.5** | **2.3** | **3.6** |
| Occasional | **1.4** | **2.2** | **3.2** | **4.1** |
| Remote | **2.1** | **2.4** | **3.4** | **4.2** |
| Improbable | **3.1** | **3.3** | **3.7** | **4.3** |
|  |  |  |  |  |
|  | **HIGH** | **MODERATE HIGH** | **MODERATE LOW** | **LOW** |

| **Item No** | **Basic Job Steps** | **Existing and Potential Hazards** | **Risk Score** | **Recommended Corrective Measures** | **Risk Score** |
| --- | --- | --- | --- | --- | --- |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |
| 6. |  |  |  |  |  |
| 7. |  |  |  |  |  |
| 8. |  |  |  |  |  |
| 9. |  |  |  |  |  |
| 10. |  |  |  |  |  |

**JHA Team Leader Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisors Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Team Members Signatures: \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_**