

**SYSTEMATIC SERVICING (EQUIP) LTD
RISK ASSESSMENT RECORD**

RA 3
Project
No:

SITE LOCATION: _____ **COMPANY NAME:** _____

OPERATIONS COVERED BY THIS ASSESSMENT: Access/Blocking of Roadways

| REF. | Key hazards associated with the above task/activity | 3 Probable | 2 Occasional | 1 Remote | 5 Catastrophic | 4 Critical | 3 Serious | 2 Marginal | 1 Negligible | Likelihood x Severity |
|--------------------------------|---|----------------------|------------------------|---------------------|----------------|------------|-----------|------------|--------------|-----------------------|
| 1 | Access on Roadway Blocked | | x | | | | | x | | 4 |
| 2 | Personal being hurt by equipment | | x | | | | | x | | 4 |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 6 | | | | | | | | | | |
| 7 | | | | | | | | | | |
| 8 | | | | | | | | | | |
| 9 | | | | | | | | | | |
| 10 | | | | | | | | | | |
| Risk Assessment scores: | | 10+ High Risk | 5-9 Medium Risk | 1-4 Low Risk | | | | | | |

| PERSONS AFFECTED | | | | | |
|------------------|---|-------------------|---|---------------|---|
| Operatives | x | Members of Public | x | Site Visitors | x |
| Other Workers | x | Managers | x | Young Persons | x |
| Others | | | | | |

| PPE REQUIREMENTS | | | | | |
|--------------------|--|-----------------|---|------------------------|---|
| Harness & Lanyard | | Hi-Viz Clothing | x | Respiratory Protection | |
| Hearing Protection | | Eye Protection | | Head Protection | x |
| Gloves | | Boots | x | Overalls | x |

| EXISTING CONTROL MEASURES |
|--|
| Information/Instruction/Training |
| All operatives to be made aware of the risks and hazards associated with blocking of roadways and walkways |

| | |
|---|-------------|
| CONTROL MEASURES CONTINUED | RA 3 |
| Information/Instruction/Training | |
| Promoted at all times | |

| | |
|--|---------------------------------------|
| Additional Controls | Physical - (Hardware Controls) |
| Work area to be cordoned off | |
| In the event of an emergency all work will cease and obstacles removed | |
| Monitoring of work are to be maintained at all times | |

| |
|-----------------|
| Comments |
| |

| |
|--|
| <u>Residual Risk Rating</u> |
| Considering the above control measures |
| LOW |

| |
|--------------------------------|
| Assessment Prepared By: |
| Name: |
| signature: |
| Date: |

This risk assessment should be read in conjunction with all relevant method statements, safe systems of work and associated risk assessments as detailed on the Risk Assessment Briefing record