

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

RA 2
Project
No:

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

OPERATIONS COVERED BY THIS ASSESSMENT: Gas Cuttings

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	Burn to other Personal		x				x			6
2	Risk of fire in work area		x				x			6
3	Use of inappropriate equipment		x					x		4
4	Burn to operator		x				x			6
5	Trailing hoses		x			x				8
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		Respiratory Protection	
Hearing Protection		Eye Protection	x	Head Protection	x
Gloves	x	Boots	x	Overalls	x

EXISTING CONTROL MEASURES

Information/Instruction/Training

All operatives to be made aware of the risks and hazards of Gas cutting in the work area
 All operatives are trained and experienced in the use of gas cutting equipment
 All operatives are trained and experienced in the inspection of gas cutting equipment
 Flash back arrestors fitted to bottles
 Area to be corded off
 Fire extinguisher present

CONTROL MEASURES CONTINUED	RA 2
Information/Instruction/Training	
Promoted at all times	

Additional Controls
<p>Work area to be cordoned off and screens to be erected where possible</p> <p>All combustibles to be removed from work area</p> <p>Fire extinguishers to be present</p>

Comments

Residual Risk Rating
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