

Document No.:	TDBL-HS-B-S-007
Addendum:	J
Type:	Form
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Last Minute Risk Assessment and Workers Register (TOOLBOX TALK)



Notes: Form must be completed at the worksite by Authorised Person and/or Competent Person responsible for activity and Work team. **This will also serve as revalidation of PTW conditions maintained for extension of PTW.**

Site: string

Date: 2025-02-20

Time: 7:00

What task is being performed today?

Test

I hereby declare that Safety Document No.test.....has been shown to all workers registered below for this work.

RISK ASSESSMENT: Use this Hazard Checklist, and PTW, Method Statements and/or Safe Work Procedures to supplement the hazards and risk identification process.

	Electrical	Condition of Apparatus changed. ☒ Proximity(near System touch/step potential) controlled. ☐ Barricade /Barriers effective and in place. ☐ Isolate,LOTO, Test & Earthas per PTW. ☐	☒ ☐ ☐ ☐	chk
	Mechanical	Isolation /LOTO / Try & Test effective as per PTW. ☐ Draining/ Bleeding/ Venting confirmed. ☐	☐ ☐	1
	Workingfromheights	Scaffold and Structure stability verified. ☒ Aerial device / Ladders condition verified. ☒	☒ ☒	3
	Slip,trips &falls	Slippery / Uneven surfaces observed. ☒ Trench covers in place. ☒ Walkways, excavation identified. ☒	☒ ☒ ☒	4
	Weatherconditions	Rain / Wind / Hot / Cold concerns. ☒ Sandstorm High humidity observed. ☒	☒ ☒	5
	Animals Insects	Dogs, Wild animals in vicinity. ☒ Insects (bees / snakes / spiders) observed. ☒	☒ ☒	6
	Fire Hazards	Combustible material removed. ☒ Flammable substances present. ☒ Gases, fumes, smoke present. ☒	☒ ☒ ☒	7
	Pollution	...Ground observed. ☒ ...Water observed. ☒ ...Air observed. ☒	☒ ☒ ☒	8
	Vegetation	Tree felling / cutting controlled. ☒ Trees or vegetation posing risk to operations. ☒	☒ ☒	9
	Occupational Hygiene	Noise impact on safe operation. ☒ Lighting impact on safe operation. ☒ Ventilation impact on safe operation. ☒ Hazardous chemical dust impact. ☒	☒ ☒ ☒ ☒	10

	Lifting machines	Lifting of material controls available. ☒ Lifting Equipment condition checked. ☒ Rigging, Slings planned. ☒	11
	Vehicle&Driversafety	Abnormalities with vehicles / machines observed. ☒ Physical / mental state of drivers checked. ☒ Terrain abnormalities observed. ☒	12
	Roadside work	Excavations demarcated. ☒ Barricading in place. ☒ Notices & Signs in place. ☒ Traffic control implemented. ☒	13
	BehaviorSafety	Mental / physical state of members. ☒ Members of public intervention or exposed to work site hazards. ☒	14
	Supervision	Level of supervision required for safe execution. ☒	15

Hard hat ☒	Gumboots ☒	Safetyshoes ☒	Safety glasses ☒	Face shield ☒	Welding helmet ☒
					
Dust mask ☒	Respirator ☒	Ear protector ☒	Fall Arrest System ☒	Gloves ☒	Operating clothing ☒
					
Reflective Vest ☒	Voltage rated gloves ☒	Arc Flash suits ☒	Arc rated face shield ☒	Overalls acid or normal ☒	Pants ☐
					
Top ☒	Dust coat ☒	Apron ☒			
					

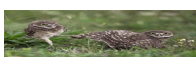
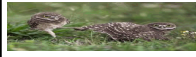
AUTHORISED PERSON / COMPETENT PERSON

I declare that the nature and location of this work/activity, as well as the precautions, special conditions, the hazards involved and the right to refuse have been explained to the workers.

Name: sa Company No.: RayInternational Signed: 

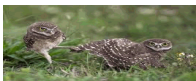
WORK TEAM MEMBERS ACKNOWLEDGEMENT

I understand the scope of work and the hazards associated with the task that I am going to perform. I further undertake to work according to the Task Manuals and/or Safe Work Procedures and as per control measures mentioned within this risk assessment that were discussed with me. I will report any unsafe acts and conditions that I discover while I am working and understand the Right to Refuse principle.

Sign On / Working			Sign Off / Working		
Name	U/No./ID No.	Signature	Name	U/No./ID No.	Signature
Employee-8	Emp-8		Employee-8	Emp-8	

AUTHORISED PERSON / COMPETENT PERSON

WITHDRAWAL: I hereby declare that all workers involved in the above-mentioned work have been withdrawn, informed that it is no longer safe to work and that a debriefing session held. Site normalized and safe.

Name sa Signature  Date 2025-02-20 Time 12:00