

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: @

Date: 2025-03-04

Time: 15:27

What task is being performed today?

@

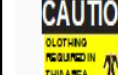
I hereby declare that Safety Document No.@.....has been shown to all workers registered below for this work.

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

Hazards		New Control measures to address hazards/risk
	Electrical Condition of Apparatus changed. ☐ Proximity(near System touch/step potential) controlled. ☐ Barricade /Barriers effective and in place. ☐ Isolate,LOTO, Test & Earthas per PTW. ☐	
	Mechanical Isolation /LOTO / Try & Test effective as per PTW. ☐ Draining/ Bleeding/ Venting confirmed. ☐	
	Workingfromheights Scaffold and Structure stability verified. ☐ Aerial device / Ladders condition verified. ☐	
	Slip,trips &falls Slippery / Uneven surfaces observed. ☐ Trench covers in place. ☐ Walkways, excavation identified. ☐	
	Weatherconditions Rain / Wind / Hot / Cold concerns. ☐ Sandstorm High humidity observed. ☐	
	Animals Insects Dogs, Wild animals in vicinity. ☐ Insects (bees / snakes / spiders) observed. ☐	
	Fire Hazards Combustible material removed. ☐ Flammable substances present. ☐ Gases, fumes, smoke present. ☐	
	Pollution ...Ground observed. ☐ ...Water observed. ☐ ...Air observed. ☐	
	Vegetation Tree felling / cutting controlled. ☐ Trees or vegetation posing risk to operations. ☐	

	Occupational Hygiene Noise impact on safe operation. ☐ Lighting impact on safe operation. ☐ Ventilation impact on safe operation. ☐ Hazardous chemical dust impact. ☐	
	Lifting machines Lifting of material controls available. ☐ Lifting Equipment condition checked. ☐ Rigging, Slings planned. ☐	
	Vehicle & Drivers safety Abnormalities with vehicles / machines observed. ☐ Physical / mental state of drivers checked. ☐ Terrain abnormalities observed. ☐	
	Roadside work Excavations demarcated. ☐ Barricading in place. ☐ Notices & Signs in place. ☐ Traffic control implemented. ☐	
	Behavior Safety Mental / physical state of members. ☐ Members of public intervention or exposed to work site hazards. ☐	
	Supervision Level of supervision required for safe execution. ☐	

PPE required as per PPE Matrix

Overallacid or normal ☐	Pants ☐	Top ☐	Dust coat ☐	Apron ☐	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 ☐			
					

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: VINI11 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 VINI11 Signature Date Time