# 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:	2025-10-31	Time: 20:02
What task is being performed today?	test			
I hereby declare that Safety Document N RISK AS SESSMENT: Use this Hazard				s registered below for this work.

RISK AS SESSMENT: 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		
4	Condition of Apparatus changed.		nbyhbnjnlkjnml,,;pkpojkljniuyftghbjjnjrjnvughgruggghju hjbnjbjnjnbgnbbgfmbnjgbgjbgjbnjknjjkm,kg,mbkvmflvfif jmfkjjjjjjjjjjjjjjjjjjjjjjjjjjjjjjjjjj
	Proximity(near System touch/step potential) controlled.  Barricade /Barriers effective and in place.	<b>V</b>	
	Isolate,LOTO, Test & Earthas per PTW.		
	Mechanical		
	Isolation /LOTO / Try & Test effective as per PTW.		
140	Draining/ Bleeding/ Venting confirmed.		
	Working from heights		
$\wedge$	Scaffold and Structure stability verified.		
	Aerial device / Ladders condition verified.		
	Slip,trips &falls		
$\wedge$	Slippery / Uneven surfaces observed.		
/ <i>*</i> }	Trench covers in place.		
	Walkways, excavation identified.		
	Weather conditions		
$\wedge$	Rain / Wind / Hot / Cold concerns.		
*	Sandstorm High humidity observed.		
	Animals Insects		
$\wedge$	Dogs, Wild animals in vicinity.		
	Insects (bees / snakes / spiders) observed.		
	Fire Hazards		
$\wedge$	Combustible material removed.		
	Flammable substances present.		
	Gases, fumes, smoke present.		

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	Pollution		
	Ground observed.	Ø	Contrary to popular belief, Lorem Ipsum is not simply random text. It has roots in a piece of classical Latin literature from 45 BC, making it over 2000 years old. Richard McClintock, a Latin professor at Hampden-Sydney College in Virginia, looked up one of the more obscure Latin words, consectetur,
	Water observed.		
	Air observed.		
	Vegetation		
$\wedge$	Tree felling / cutting controlled.	$\checkmark$	
<b>/</b> 奉\	Trees or vegetation posing risk to operations.		
	Occupational Hygiene		
$\wedge$	Noise impact on safe operation.		
	Lighting impact on safe operation.		
	Ventilation impact on safe operation.		
	Hazardous chemical dust impact.		
	Lifting machines		
$\wedge$	Lifting of material controls available.		
<mark>  [□</mark>	Lifting Equipment condition checked.		
	Rigging, Slinging planned.		
	Vehicle & Driver safety		
$\triangle$	Abnormalities with vehicles / machines observed.		
<mark>∂LQ</mark>	Physical / mental state of drivers checked.		
	Terrain abnormalities observed.		
	Roadside work		
$\wedge$	Excavations demarcated.		
8	Barricading in place.		
	Notices & Signs in place.		
	Traffic control implemented.		
	Behavior Safety		
$\wedge$	Mental / physical state of members.		
<b>(森)</b>	Members of public intervention or exposed to work site hazards.		
	Supervision		
<b>B</b> , <b>W</b>	Level of supervision required for safe execution.		

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### **PPE required as per PPE Matrix**

Overallacid or normal		Pants	Тор	Dust coat	Apron	
				<b>(3)</b>	0	
Hard hat		Gumboots	Safetyshoes	Safety glasses	Face shield	
		(3)			0	
Welding helmet	V	Dust mask	Respirator	Ear protector	Fall Arrest System	
		8	(8)		<b>(</b>	
Gloves		Operating clothing	Reflective Vest	Voltage rated gloves	Arc Flash suits	
<b>(1)</b>		CAUTION OLOTHNO PEGLINED IN THERMALA	0			
Arc rated face shield						
0						

#### 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:	Company No.: RayInternational	Signed:
INAIII <del>C</del> .	Collibativ No	Sidiled.

### **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-16	Emp-16		Employee-16	Emp-16		

#### **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	userin	Signature	Date	Time