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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: dddddddddddddddddddd

Date: 2025-04-08

Time: 11:48

What task is being performed today?

I hereby declare that Safety Document No. 9999999999988...has been shown to all workers 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 identif	ication process.		
	Hazards		New Control measures to address hazards/risk
14	Electrical Condition of Apparatus changed.	Ø	dddddddddddddddddddddddddddddddddddddd
	Proximity(near System touch/step potential) controlled.	V	
	Barricade /Barriers effective and in place.		
	Isolate,LOTO, Test & Earthas per PTW.		
14	Mechanical Draining/ Bleeding/ Venting confirmed.		dddddddddddddddddddddddddddddddddddddd
	Isolation /LOTO / Try & Test effective as per PTW.		
	Working from heights Scaffold and Structure stability verified.		dddddddddddddddddddddddddddddddddddddd
	Aerial device / Ladders condition verified.		addadddddddd
<u> </u>	Slip,trips &falls Trench covers in place.		dddddddddddddddddddddddddddddddddddddd
	Walkways, excavation identified.		
	Slippery / Uneven surfaces observed.		
	ı		1

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	Weather conditions Rain / Wind / Hot / Cold concerns. Sandstorm High humidity observed.		dddddddddddddddddddddddddddddddddddddd
	Animals Insects Insects (bees / snakes / spiders) observed. Dogs, Wild animals in vicinity.		dddddddddddddddddddddddddddddddddddddd
	Fire Hazards Combustible material removed. Flammable substances present. Gases, fumes, smoke present.	0	dddddddddddddddddddddddddddddddddddddd
	PollutionAir observedWater observedGround observed.		dddddddddddddddddddddddddddddddddddddd
*	Vegetation Tree felling / cutting controlled. Trees or vegetation posing risk to operations.		dddddddddddddddddddddddddddddddddddddd

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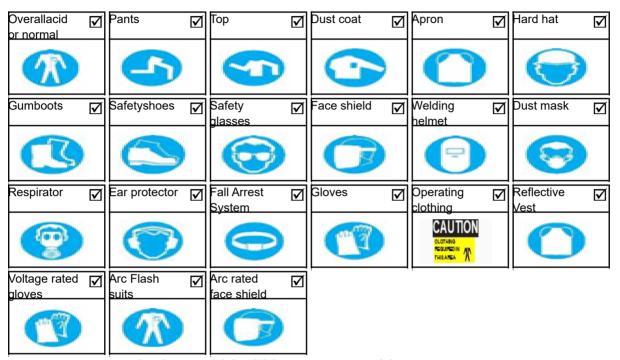
Occupational Hygiene Lighting impact on safe operation. Noise impact on safe operation. Ventilation impact on safe operation. Hazardous chemical dust impact.		dddddddddddddddddddddddddddddddddddddd
Lifting machines Rigging, Slinging planned. Lifting of material controls available. Lifting Equipment condition checked.		dddddddddddddddddddddddddddddddddddddd
Vehicle & Driver safety Physical / mental state of drivers checked. Abnormalities with vehicles / machines observed. Terrain abnormalities observed.		dddddddddddddddddddddddddddddddddddddd
Roadside work Notices & Signs in place. Traffic control implemented. Excavations demarcated. Barricading in place.		dddddddddddddddddddddddddddddddddddddd
Behavior Safety Members of public intervention or exposed to work site hazards. Mental / physical state of members.	0	dddddddddddddddddddddddddddddddddddddd

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Supervision Level of supervision required for safe execution.	dddddddddddddddddddddddddddddddddddddd

PPE required as per PPE Matrix



AUTHORISED PERSON / COMPETENT PERSON

I declare that the nature and location of this work/activit	y, 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	50	Employee-8	Emp-8	9
Employee-9	Emp-9	9	Employee-9	Emp-9	4

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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	2025-04-08	Time 11:51
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