

Cultural Services, Special Events

Risk Assessment

| Activity to be Assessed | | | Assessment Number | | | | | | | |
|-------------------------|------------------------------|---------------------|-------------------|-----------|------------|--|--|--|--|--|
| | | | | | | | | | | |
| D | | | | | | | | | | |
| Persons | s undertaking or affected by | the activity | | | | | | | | |
| | X Employees X C | ontractor X Publi | с | | | | | | | |
| | Other | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Identifie | ed Hazards and Associated l | Risks | Likelihood | Severity | Risk Level | | | | | |
| 1 | | | | | | | | | | |
| 2 | | | | | | | | | | |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 6 | | | | | | | | | | |
| 7 | | | | | | | | | | |
| 8 | | | | | | | | | | |
| 9 | | | | | | | | | | |
| Existing | g Control Measures / Additio | nal Control Measure | s Required | | | | | | | |
| 1 | | | | | | | | | | |
| 2 | | | | | | | | | | |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 5 6 | | | | | | | | | | |
| 7 | | | | | | | | | | |
| 8 | | | | | | | | | | |
| 9 | | | | | | | | | | |
| | ssment of Activity Hazards | | Likelihood | Severity | Risk Level | | | | | |
| 1 | | | | | | | | | | |
| 2 | | | | | | | | | | |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 6 | | | | | | | | | | |
| 7 | | | | | | | | | | |
| 8 | | | | | | | | | | |
| Name: | | Signed | | Verified: | | | | | | |
| Position: | | | | | | | | | | |

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| ITEM | SYMBOL | TICK IF REQUIRED | NOTES |
|------------------------|----------------|---------------------|--|
| Dust mask | Wear dust mask | | |
| Ear Protection | | | |
| Footwear | | √ | Only as required by activity risk assessment |
| Gloves | | | |
| Safety Glasses | | | |
| Hard Hat | | | |
| Hi-Visibility Clothing | | | |
| Other | | | |

| Reviews | KEY | | | | | | | | |
|---------------|---|--|----------------------|---|----|-------------|----|----|-----------|
| Review Date : | Likelihood | Severity | | 5 | 5Y | 10R | 15 | 20 | 25 |
| Reviewed by: | 1 - very unlikely 2 - unlikely 3 - likely | 1 - nuisance 2 - minor 3 - medical treatment | Injury | 4 | 4 | 8 | 12 | 16 | 20 |
| Review Date : | | | of | 3 | 3 | 6G | 9 | 12 | 15 |
| Reviewed by: | | | verity | 2 | 2 | 4 | 6Y | 8 | 10Y |
| Review Date : | | | eve | 1 | 1 | 2 | 3 | 4 | 5G |
| Reviewed by: | 4 - very likely | 4 - major 5 - fatal | Se | 0 | 1 | 2 | 3 | 4 | 5 |
| Review Date : | riew Date : 5 - certainty | | Likelihood of Injury | | | | | | 1 |
| Reviewed by: | | | Low Risk | | | Medium Risk | | | ligh Risk |

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Method Statement

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