

**ANNEXURE Q
HAZARD IDENTIFICATION**

Hazard and/or near hit identification and investigation



THIS SECTION TO BE COMPLETED BY PERSON INVESTIGATING THE HAZARD or NEAR HIT

Location: <i>(Address and area of hazard or near hit)</i>		Date hazard discovered:	
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What is the hazard or near hit:

Rate the hazard:

1	L	L	L	L	L
2	L	L	L	L	M
3	L	L	L	M	M
4	L	L	M	H	H
5	L	M	M	H	H
	1	2	3	4	5

Risk Analysis - what is the likelihood of injury occurring?

Severity - how bad could an injury be?

1 is low and 5 is high. So, if the chance of an injury occurring is very low – but it could seriously injure someone, then the rating would be: 1 x 5 = 5

I gave the hazard a rating of? _____ x _____ = _____

What do you think should be done about it?

DETAILS OF PERSON COMPLETING THIS SECTION OF THE FORM

Full Name:		Signature:	
Position:		Date:	

THIS SECTION TO BE COMPLETED BY PERSON INVESTIGATING THE HAZARD or NEAR HIT

What rating would you give this Hazard?

____ x ____ = _____

In order to take all Reasonably Practicable steps, how can we:

Eliminate the hazard?

Isolate the hazard?

Minimise the hazard?

Action Taken:

Does the Hazard Register need to be updated to include this?

Yes No

DETAILS OF PERSON COMPLETING THIS SECTION OF THE FORM

Full Name:

Signature:

Position:

Date:

DETAILS OF HEALTH AND SAFETY REPRESENTATIVE

Any further comments to add?

Full Name:

Signature:

Position:

Date: