



Grays

300

SAFE WORK METHOD STATEMENT

SWMS	Responsible Person		SMWS Participants		
	1.	4.	1.	4.	7.
	2.	5.	2.	5.	8.
	3.	6.	3.	6.	9.

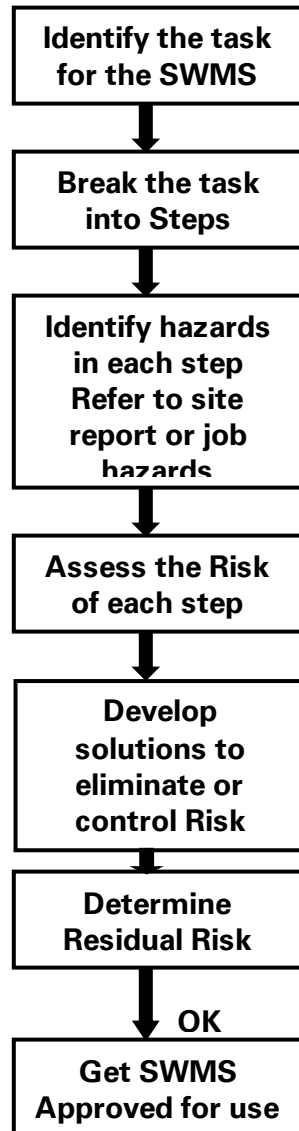
Prepared By:				Approved By:			
	Name	Signature	Date		Grays	Signature	Date

Job Location and Work to be Performed:

Additional information (if required):

SAFE WORK METHOD STATEMENT

SWMS PROCESS FLOW CHART



TASK REQUIREMENT CHECKLIST

Grouping	System, Tools, Licenses, Equipment Checks, Permits, Insurances	
Insurances Licenses		
Equipment		
Personal Protective Equipment		
Permits		
Other relevant Requirements		

Instructions for completion of SWMS:

- SWMS to be prepared by Contractor
- SWMS to be reviewed by Grays personnel and amended if required with specific:
 - PPE Requirements
 - Induction Requirements
 - Permits
 - Any other relevant requirements

The identified hazards will be evaluated in accordance with their probability and severity, and classified in the categories indicated below



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Basic / Job Steps	Potential Accident or Hazard	Personnel at Risk	Risk Control Measure	Likelihood	Consequence	Responsible for Control Measure Action	Action Done
	Hazard Description and Effect for each Task.		List and describe fully all Controls Required				



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