

SAFE WORK METHOD STATEMENT

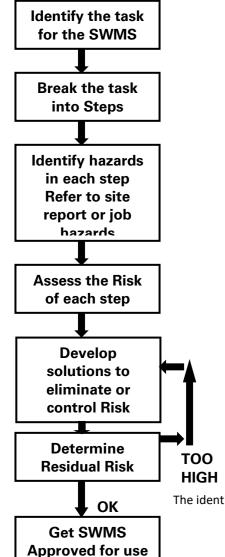
SWMS		Responsible Perso	on	SMWS Participants						
	1. 2.		-	1.			7.			
				2.	5.		8.			
	3.	6.		3.	6.		9.			
Prepared By:				Approved By:						
	Name	Signature	Date		GraysOnline	Signature	Date			

Job Location and Work to be Performed:

Additional information (if required):



SWMS PROCESS FLOW CHART



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 GraysOnline 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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