

Job Hazard Analysis

Task			Date:	Time: am / pm	
Location		Company / Department			
Is there Site Procedure(s) for the task		Yes / No	List Procedure(s)		
Task Review and Change Management					
Date and Time	Step # Changed	Description of Change	New Controls		Change Approved
Personal Protective Equipment Required for Task (Circle PPE required)					
					
Capped Boots	Hard Hat	Hand protection	Hi Vis Clothing	Eye Protection	Face Shield
					
Hearing Protection	Dust Mask	Respirator	Breathing Apparatus	Fall Protection	Overalls
					
Apron	Personal Locks	No Smoking			
Name	Position in the Organisation	Signature	Working at Heights Permit No:		Hot Work (Cut / Weld) Permit No:
			Land Disturbance Permit No:		Heavy / Difficult Lift Permit No:
			Confined Space Permit No:		Excavation, Trenching and / or Penetration Permit No:
			H/V Access Permit No:		Other (list): Permit No:
			Equipment Checks / Energy Isolations Required:		
			Site specific authorisations required to carry out tasks:		
			Reference Standards / Original Equipment Manufacturers Manuals available for the task:		
			Special considerations (Dogman / Rigger / EWP / Scaffolding / Gas Mon / Other:		

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Identify steps of task in a logical order (Steps in Process)	Identify Hazards (What could go wrong)	Identify all controls existing and new controls	Assess level of risk		
			Consequence	Likelihood	Risk Rank



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Supervisor to sign off and approval given for task to commence under this JHA.					
Supervisor name:		Signature:		Crew:	Date:
ALL "HIGH" RATED RISKS THAT WERE IDENTIFIED ARE TO HAVE A FORMAL RISK ASSESSMENT PROCESS CONDUCTED PRIOR TO THE TASK COMMENCING. ADVICE SUPERVISOR OF ALL"HIGH" RATED RISKS.					
I have read and understood this JHA and agree with the logical steps, hazards identified and the controls in place to complete the task.					
Name:	Signature	Crew (A, B,)	Name	Signature	Crew (A, B)