



WHS Contractor Management - Hazard Identification

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PRIOR to engaging a Contractor, conduct (or request the contractor conduct) a hazard identification and risk assessment process in line with Council's procedures. Where there are hazardous components relating to the work or the work environment, these should be identified and documented on the appropriate table regarding the relevant controls or precautions, as well as any licence or permit details required. The contractor is required to nominate how they will control any hazards identified by the organisation prior to commencing work. The identification table below is not all encompassing and any additional hazards identified should be recorded within this document.

Contract Details

Type of work: _____
Location of work: _____

Hazard Identification

- | | | |
|--|---|--|
| <input type="checkbox"/> Asbestos / Lead | <input type="checkbox"/> Inclement weather | <input type="checkbox"/> Trenching / excavation |
| <input type="checkbox"/> Chemical exposure | <input type="checkbox"/> Lack of first aid / emergency plan | <input type="checkbox"/> Underground services |
| <input type="checkbox"/> Compressed air / pressure / vacuum | <input type="checkbox"/> Lighting | <input type="checkbox"/> Overhead services |
| <input type="checkbox"/> Confined space / hazardous atmosphere | <input type="checkbox"/> Manual handling / ergonomics | <input type="checkbox"/> Uneven / slippery surfaces |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Noise | <input type="checkbox"/> UV exposure |
| <input type="checkbox"/> Diving | <input type="checkbox"/> Open bodies of water | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Others working in the vicinity | <input type="checkbox"/> Working at heights |
| <input type="checkbox"/> Excavation / trenching | <input type="checkbox"/> Plant / equipment / machinery | <input type="checkbox"/> Working on live electricity |
| <input type="checkbox"/> Falling Objects | <input type="checkbox"/> Powered mobile plant | <input type="checkbox"/> Working near live electricity |
| <input type="checkbox"/> Falls from one level to another | <input type="checkbox"/> Remote / isolated work | <input type="checkbox"/> Working over a pit hole |
| <input type="checkbox"/> Fire / explosion | <input type="checkbox"/> Restricted access | Other: (add to monitoring checklist) |
| <input type="checkbox"/> Gas / fumes | <input type="checkbox"/> Site access / security | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Heat sources | <input type="checkbox"/> Soil contamination | <input type="checkbox"/> _____ |
| <input type="checkbox"/> High risk construction work | <input type="checkbox"/> Traffic / pedestrians | <input type="checkbox"/> _____ |

Controls or Precautions in relation to this contract

Physical Isolations

- Barricading
 Electrical
 Gas
 Hydraulic
 Traffic
 Pneumatic
 Water
Other: _____

Plant & Equipment

- Elevating work platform
 Forklift
 Ladder
 Safety data sheet
Permits to Work:
 Confined space
 Hot work
 Working at heights
Other: _____

Personal Protective Equipment

- Clothing (*long sleeved shirt, trousers, overalls*)
 Eye wear (*sunglasses, safety glasses, goggles, face shield*)
 Gloves (*safety, chemical, heavy duty, riggers*)
 Head wear (*broad brimmed hat, hard hat, welding helmet*)
 Hearing protection
 High visibility vest or clothing
 Respirator / mask
 Safety boots
 Safety harness
 Spill containment kit
 Wet weather gear

Is the work high risk construction work? Yes No
If yes, a Safe Work Method Statement is required *prior* to commencement of work.
Is the work construction work valued at \$450,000 or more? Yes No
If yes, a WHS Management Plan is required *prior* to the commencement of work.

The Contract superintendent / project manager has given the contractor any additional information Council has in relation to hazards and risks at or in the vicinity of the workplace where work is to be carried out.

Prior to the commencement of work, the Contractor is required to confirm the hazard(s) identified and document the controls or precautions as outlined here and provide all required licences and / or permit details.

Contract Superintendent / Project Manager Name: _____

Contract Management / Project Manager Signature: _____ Date: _____

Office Use Only: A copy of this form (along with any additional information), has been sent to the Contractor