

		<b>PCBU / COMPANY DETAILS:</b>	
		Name:	
		Address:	
		ABN:	Phone no.:
<b>PROJECT:</b>		<b>CLIENT / PC DETAILS:</b>	
Address:		Name:	
Start date:		Contact:	Phone no.

**Scope of work covered by this SWMS**

The Sample Safe Work Method Statement (SWMS) outlines the [redacted].

The SWMS provides details of the control measures required to protect workers from exposure to these hazards and risks.

**INSTRUCTIONS FOR SWMS**

**A safe work method statement (SWMS) must be prepared for any [redacted] work in accordance with this SWMS.**

This SWMS must be kept and be available for inspection until the high risk construction work to which this SWMS relates is completed. If the SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to the high risk construction work in this SWMS, the SWMS must be kept for at least 2 years from the date of the notifiable incident.

**Sample work activities (Check any that are applicable to this job)**

<input type="checkbox"/>	Hidden in sample	<input type="checkbox"/>	Demolition of a load-bearing structure	<input type="checkbox"/>	Work on a telecommunications tower
<input type="checkbox"/>	Work in or near a shaft or trench with an excavated depth over 1.5m; or in a tunnel	<input type="checkbox"/>	Temporary load-bearing support structures	<input type="checkbox"/>	Work on or near pressurised gas distribution mains or piping
<input type="checkbox"/>	Work in an area at a workplace in which there is any movement of powered mobile plant	<input type="checkbox"/>	Hidden in sample	<input type="checkbox"/>	Work on or near chemical, fuel or refrigerant lines
<input type="checkbox"/>	The disturbance of or likely disturbance of asbestos	<input type="checkbox"/>	Tilt-up or precast concrete	<input type="checkbox"/>	Hidden in sample
<input type="checkbox"/>	Hidden in sample	<input type="checkbox"/>	Work on, in or adjacent to a road, railway, shipping lane or other traffic corridor used by traffic other than pedestrians	<input type="checkbox"/>	Work on, under or near water or other liquid that involves a risk of drowning
<input type="checkbox"/>	Work carried out in or near a confined space	<input type="checkbox"/>	Work in an area that may have a contaminated or flammable atmosphere	<input type="checkbox"/>	Hidden in sample

Person responsible for ensuring compliance with SWMS:			Signature:			SWMS issue date:		
Person responsible for reviewing SWMS:			Signature:			SWMS review date:		
How will SWMS be communicated to workers?		Toolbox talk/pre-start		Site induction		Person responsible (name):		
How will SWMS be monitored?		Supervision		Regular inspections		Hazard assessments		Date SWMS provided to PC/Client:

**Site-specific considerations**

# SAFE WORK METHOD STATEMENT

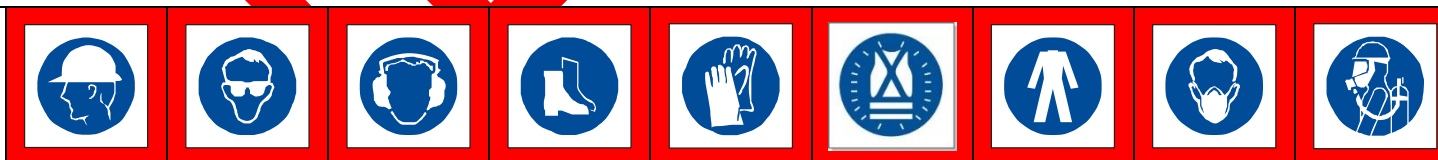
# Sample SWMS

**NOTE: This is a generic SWMS.** A generic SWMS may be prepared and used for high risk construction work activities that are carried out on a regular basis; however, the generic SWMS must be reviewed by the person carrying out the work to take into account the hazards and risks for the specific workplace and amend the SWMS as necessary for the site where the work is to be carried out, and complete details such as names and qualifications of workers who will carry **HIDDEN IN SAMPLE** in the SWMS by site-specific inductions or toolbox talks. Details of consultation with workers and instruction in the SWMS must be recorded on the SWMS for that project or site. All workers are required to sign-off on the SWMS before the work is commenced.

Plant, tools and equipment required	Safety inspections and maintenance	Chemicals to be used on site			
		Name of chemical	Hazard class (GHS)	Category	SDS date

High risk work licenses and competencies required					Safety equipment required	
Plant or occupation	Class	Type/description	Worker's name	Number		
					Barricading, traffic control devices	
					Signage	
					Fall prevention (safety harness, lanyard)	
					Traffic control	
					Other (specify):	

**PERSONAL PROTECTIVE CLOTHING AND EQUIPMENT (PPE) REQUIRED**  
 (Required PPE is highlighted). Ensure all workers have required PPE before any work requiring the PPE is commenced.



RISK CALCULATOR	Likelihood of an incident occurring			Risk level and control actions required		
	Likely outcome of an incident	Very likely	Likely	Unlikely	Risk Level	Action required to control risk
Serious injury or death; major environmental impact	<b>HIGH</b>	<b>HIGH</b>	<b>MODERATE</b>	<b>HIGH</b>	<b>High risk</b>	Urgent action required to control risk
Hidden in sample	<b>HIGH</b>	<b>MODERATE</b>	<b>LOW</b>	<b>MODERATE</b>	<b>Medium risk</b>	Ensure listed controls are implemented
First aid injury, minor damage; negligible or minor environmental impact	<b>MODERATE</b>	<b>LOW</b>	<b>LOW</b>	<b>LOW</b>	<b>Low risk</b>	Monitor task and existing controls
Hierarchy of risk controls (in order of preference): 1 Elimination (most effective) → 2 Substitution → 3 Isolation → 4 Engineering means → 5 Administrative controls → 6 PPE (least effective)						

Job activity	Hazards and associated risks	Risk level	How will the hazards and the risks be controlled?	Who will do this?

# SAFE WORK METHOD STATEMENT

# Sample SWMS

Inductions and training	Untrained workers	<b>HIGH</b>	Hidden in sample	
Competency of operators	Hidden in sample		Persons carrying out abrasive blasting work should have completed the training course MEM08012B <i>Prepare surfaces by abrasive blasting</i> or MEM08013B <i>Prepare surfaces by abrasive blasting (advanced)</i> .	
Preparation for abrasive blasting	Abrasive blasting chambers	<b>HIGH</b>	Hidden in sample	
	Hidden in sample	<b>MODERATE</b>	Post warning signs at entry to work area to prevent entry without authorisation and wearing of required PPE. Persons carrying out abrasive blasting must wear: <ul style="list-style-type: none"> <li>• hood or helmet airline respirator with inner bib</li> <li>• high visibility shoulder cape or jacket and/or protective suit</li> <li>• hand, hearing and foot protection.</li> </ul>	
	Selection of blasting media	<b>HIGH</b>	Ensure that the blasting media selected is appropriate for the work to be carried out and is not included on the list of prohibited media as prescribed in regulations. A current SDS must be obtained for all blasting media before it is used for abrasive blasting purposes.	
	Hazardous manual tasks	<b>HIGH</b>	Hidden in sample	

Job activity	Hazards and associated risks	Risk level	How will the hazards and the risks be controlled?	Who will do this?
Abrasive blasting	Personal injury	<b>HIGH</b>	Hidden in sample	
	Hidden in sample	<b>HIGH</b>	Ensure that all doors to blasting chamber are closed and sealed properly before commencing abrasive blasting. Ensure that adequate illumination is provided within blasting chamber to carry out work safely. Prevent entry into blasting chamber while abrasive blasting is being carried out. Any persons working as assistants in the chamber while abrasive blasting is being carried must wear all required protective clothing and equipment as provided to operators.	
Hidden in sample	Hazardous exposure	<b>MODERATE</b>	Hidden in sample	
Cleaning and inspection of equipment	Exposure to dust	<b>HIGH</b>	Hidden in sample	
Hidden in sample	Unserviceable PPE	<b>HIGH</b>	Clean and inspect all PPE daily as recommended by manufacturer. Replace any damaged or defective PPE.	

# SAFE WORK METHOD STATEMENT

# Sample SWMS

Disposal of waste	Hidden in sample	MODERATE	Place waste media and used disposable or damaged PPE into sealable bags or containers for disposal. Dispose of waste media and 'safe' contaminants as landfill.	
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Job activity	Hazards and associated risks	Risk level	How will the hazards and the risks be controlled?	Who will do this?
Disposal of waste (continued)	Environmental risk	MODERATE	Hidden in sample	

Additional hazards and risks (site-specific – not included elsewhere in SWMS)				
Job activity	Hazards and associated risks	Risk level	How will the hazards and the risks be controlled?	Who will do this?

Worker consultation, instruction and sign off					
All workers must sign below before commencing work covered by this SWMS: <i>I have been consulted, instructed in and fully understand the content of this SWMS</i>					
Worker's name	Signature	Date	Worker's name	Signature	Date

Review No.	01	02	03	04	05	06
Signature						
Date						