

# JOB SAFETY ANALYSIS WORKSHEET

Plant Area	
Company Name	
Site Name	
Site Address	
Contractor	
Work permit required	Yes <input type="checkbox"/> No <input type="checkbox"/>
Job number	
Activity	
Date	

Use this risk matrix to evaluate the likelihood or probability of the risk and the severity of the consequences.

		1 Insignificant	2 Minor	3 Significant	4 Major	5 Severe
5 Almost Certain	5 Medium	10 High	15 Very high	20 Extreme	25 Extreme	
4 Likely	4 Medium	8 Medium	12 High	16 Very high	20 Extreme	
3 Moderate	3 Low	6 Medium	9 Medium	12 High	15 Very high	
2 Unlikely	2 Very low	4 Low	6 Medium	8 Medium	10 High	
1 Rare	1 Very low	2 Very low	3 Low	4 Medium	5 Medium	

Activity	Hazards	Risk Control	Risk Rating	Responsible Person						
List the task required to perform the activity in the sequence they are carried out.	Against each task list the hazards that could cause injury when the task is being performed.	List the control measure required to eliminate or minimise the risk of injury arising from the identified hazard.	See Matrix above to calculate Risk Rating. Tick the appropriate box.	The person to implement the control measure identified.						
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**Additional notes and all involved parties to sign:**

Notes

Sign \_\_\_\_\_ Sign \_\_\_\_\_

Sign \_\_\_\_\_ Sign \_\_\_\_\_

Sign \_\_\_\_\_ Sign \_\_\_\_\_

Take a photo of the worksite