

DATE		RISK ASSESMENT – PART 1	REFERENCE
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SITE:	ADDRESS:
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WORK ACTIVITY / CONTRACT TYPE:		
PERSONS EXPOSED	No:	Comments (include reference to trainees, disabled etc)
EMPLOYEES	2	
OTHER WORKERS	0	
PUBLIC	0	

HAZARDS IDENTIFIED ✓ IF PRESENT / REQUIRING ACTION X IF ABSENT / NOT SIGNIFICANT				
PHYSICAL INJURY HAZARDS		PHYSICAL AGENTS		MANUAL HANDLING
Mobile plant		Ionizing radiation		Manual handling injury
Moving parts of machinery		Lasers		Miscellaneous
Moving materials		Ultraviolet light		Weather
Fall from heights		Cold objects		Lone working
Access equipment		Hot objects		Confined spaces
Slips, trips, falls	✓	Temperature		Restricted access
Excavations		Noise/vibration		Communications
Pressurized systems		HAZARDOUS SUBSTANCES		Police Log No (Shoot)
Electrical		Hazardous substances	✓	Other
Hot work / fire		Micro-organisms	✓	Other
Explosion		Vermin/Weil's disease		Other
If other (please specify)				

Specific Site Conditions
Describe site elements which create specific risks (i.e., loft work = crawling boards & gassing work = weather conditions etc). Shooting = possible ricochet = possible injury to anyone in vicinity without PPE Disturbing dry pigeon droppings = possible respiratory problems to anyone in immediate vicinity without PPE

Risk Evaluation (see checklist above)			
Score	1 = Unlikely / minor	2 = Possible / moderate	3 = Likely / serious
	Likelihood of Harm Score 1 -3	Severity Score 1 -3	Risk Number Scores Multiplied
Physical Injury	1	1	1
Physical Agents	1	1	1
Hazardous Substances	1	1	1
Manual Handling	1	1	1
Miscellaneous	1	1	1

State key Risks (Use Risk Evaluation Score for priorities – 5 + priorities)

Control Measure – See Risk Assessment Summary Form 2 on Reverse
Signed:
Position: Date:

DATE		RISK ASSESMENT – PART 2	REFERENCE
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SITE:	ADDRESS:
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ASSESSMENT FOR:

SIGNIFICANT RISKS:

CONTROL ITEM	DETAILS OF CONTROL MEASURE
Documents & Procedures	Permit to work and method statement
Information	As above
Instruction	As per purchase order
Training	Fully trained pest control staff
Supervision	Supervised – 2 men working
Access	Restricted
Environment	?
Equipment	Pre-charged air rifle – Scraper – Brush – 5 litre sprayer
Emergencies	24 hour emergency line 07958 913802
Communications	Via mobile phones
COSHH	All preparations used are approved by COSHH
PPE	Safety visor P3 and A2 respirators Oeralls hard hat safety boots gloves High visibility vest.
OTHER PROCEDURES	

The above controls have been selected to protect the health & safety of operatives and others who may be affected by the work. The controls have been designed to protect against the risks recorded on the risk assessment summary part 1. This general guidance should only be used when it is appropriate to specific site conditions.