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| **Checklist  Last Minute Risk Assessment** |

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|  | Created by | Checked by | Approved by |
| **Name** | Demey Bruno | Vermaete Christophe | Smismans Ronny |
| **Date** | 09/04/2013 | 31/07/2013 |  |
| **Position** | Environment, Health and Safety (EHS) Officer | EHS Officer | Director Facilities Management & EHS |

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| Version | Author | Date | Description |
| AA | BRUD | 09/04/2013 | First version |
| AB | CHRIV | 31/07/2013 | New template and additions |
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# Purpose

Before work can begin, it must be ensured that all **risks are under control** and the necessary **prevention measures** have been taken. This simple checklist will help you to identify these risks. Think about each question carefully. If you have ticked NOK in response to one of the questions, it is imperative that you contact your manager. Where this is the case, you may not start the works under any circumstances.

# Description of the works

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# Associated documents

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| --- | --- | --- | --- |
| Nature | Document | Version | Title |
| Procedure | EHS-PR-2032 | AA | Health and safety arrangements - Part 1: General regulations for all sites (BE) and all works involving third parties |
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# Method

Before you start on a task or in the event of any changes to a task, ask yourself the following questions.

* 1. Which works are to be performed?
  2. How is the work to be performed?
  3. What are the dangers?
  4. What are the risks?

Always follow the next three steps.

**Step 1: Assess the risk**

* + - What do you think can still go wrong?
    - Which dangers do you see?
    - Dangerous situations?

**Step 2: Establish measures to eliminate or reduce the risk**

* + - What measures can be put in place to remove the risks that still remain or to make them acceptable?

**Step 3: Take action to ensure safe performance**

* + - Implement the measures that are necessary to remove the risks that that still remain or to make them acceptable.
    - In other words, ensure that the activities can be carried out safely.
    - Keep the measures in place during the works.
    - Evaluate the measures on completion of the works.

**If it cannot be done safely, then do not do it!**

**Consult your direct manager.**

# Checklist

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| **At the start of the works** | **OK** | **NOK** | **NA** |
| Do I have sufficient information about the work to be performed? |  |  |  |
| Do I consider the agreed working method to be safe? |  |  |  |
| Have I read and understood the permit? |  |  |  |
| Have all the terms and conditions of the permit been met? |  |  |  |
| Is all of the equipment needed duly available and is it in good working order? |  |  |  |
| Does everyone have the necessary PPE? |  |  |  |
| Is the working environment neat and tidy? |  |  |  |

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| **Are there any additional dangers?**  If yes, specify them in the list below and discuss whether additional measures are required. If you believe the risk to be acceptable, indicate this by putting 'OK'. If this is not the case, put 'NOK' and ask your manager for advice. | | | |
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| **Are there any additional dangers?** | **OK** | **NOK** | **NA** |
| Fall or tripping hazard? |  |  |  |
| Risk of impact injury? |  |  |  |
| Danger of being hit by moving parts or internal transport? |  |  |  |
| Trapping hazard? |  |  |  |
| Danger of falling objects? |  |  |  |
| Sufficient lighting? |  |  |  |
| Exposure to high or low temperatures? |  |  |  |
| Contact with electrical current? |  |  |  |
| Contact with hazardous products? |  |  |  |
| Dust formation? |  |  |  |
| Noise or vibrations? |  |  |  |
| Fire or explosion hazard? |  |  |  |
| Are other people working in the vicinity of the construction site? |  |  |  |
| Is there a risk of environmental pollution? How is waste removed? |  |  |  |
| Does everyone know what to do in the event of an accident, fire or evacuation, and the meaning of the emergency numbers: 66 or 44 or 0112? |  |  |  |
| Other ... |  |  |  |

# Persons present at this LMRA

The undersigned managers and operators have taken due note of the conditions for safely undertaking the works involving third parties and shall comply with these conditions. They will assess any additional risks using the LMRA checklist. They will also apply for and act in accordance with the necessary works permits.

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| **Managers** | | | | |
| Last name | First name | Company | Signature | Date |
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| **Operators** | | | | |
| Last name | First name | Company | Signature | Date |
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