

## Forklift Gas And Fuel | SAFE WORK METHOD STATEMENT (SWMS)

### TASK OR ACTIVITY: Forklift Gas And Fuel

Business Name: [Company Name]

ABN: [ABN]

SWMS#

Business Address: [Company Address]

Contact Person:

Phone: [Phone]

Email:

### THIS SAFE WORK METHOD STATEMENT IS APPROVED BY THE PCBU OF THE PROJECT

Under the Work Health and Safety Regulation (WHS Regulation), a person conducting a business or undertaking (PCBU) is required to ensure that a safe work method statement (SWMS) is prepared before the proposed work starts.

Full Name:

Signature:

Title:

Date:

Details of the person(s) responsible for ensuring implementation, monitoring and compliance of the SWMS, as well as reviews and modifications of the SWMS.

Full Name:

Title:

Phone:

ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS SWMS MUST HAVE THE FOLLOWING COMMUNICATED

NAME AND DATED SIGNATURE OF ALL RELEVANT PERSONNEL WHO HAVE BEEN CONSULTED AND COMMUNICATED TO IN THE DEVELOPMENT AND APPROVAL OF THIS SWMS

Safety meetings or toolbox talks will be scheduled in accordance with legislative requirements to first identify any site hazards, then to communicate those hazards and then to further take steps to either eliminate or control each hazard.

NAME

SIGNATURE

DATE

If an incident or a near miss occurs, all work must stop immediately. Depending on the severity of the incident, a meeting will be called with all workers to amend the SWMS if required. The meeting may also be an educational opportunity.

Any changes made to the SWMS after an incident or a near miss must be approved by the Person Conducting Business or Undertaking and communicated to all relevant personnel.

The SWMS must be kept and be available for inspection at least until the work is completed. Where a SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to which the SWMS relates, then the SWMS must be kept for at least two years from the occurrence of the notifiable incident.

## CLIENT OR PRINCIPAL CONTRACTOR DETAILS












Client:	SCOPE OF WORKS  Provide a detailed description of the specific work being carried out (otherwise known as scope of works).
Project Name:	
Project Address:	
Project Manager:	
Contact Phone:	
Project Manager Signature:	
Date SWMS supplied to Project Manager:	

## ANY HIGH-RISK CONSTRUCTION WORK BEING CARRIED OUT

<input type="checkbox"/> involves a risk of a person falling more than 2 meters.	<input type="checkbox"/> is carried out on or near pressurised gas mains or piping.
<input type="checkbox"/> is carried out on a telecommunication tower.	<input type="checkbox"/> is carried out on or near chemical, fuel or refrigerant lines.
<input type="checkbox"/> involves demolition of an element of a structure that is load-bearing.	<input type="checkbox"/> is carried out on or near energised electrical installations or services.
<input type="checkbox"/> involves demolition of an element related to the physical integrity of a structure.	<input type="checkbox"/> is carried out in an area that may have a contaminated or flammable atmosphere.
<input type="checkbox"/> involves, or is likely to involve, disturbing asbestos.	<input type="checkbox"/> involves tilt-up or precast concrete.
<input type="checkbox"/> involves structural alteration or repair that requires temporary support to prevent collapse.	<input type="checkbox"/> is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor.
<input type="checkbox"/> is carried out in or near a confined space.	<input type="checkbox"/> is carried out in an area of a workplace where there is any movement of powered mobile plant.
<input type="checkbox"/> is carried out in/near a shaft or trench deeper than 1.5m or tunnel involving use of explosives.	<input type="checkbox"/> is carried out in areas with artificial extremes of temperature.
<input type="checkbox"/> is carried out in or near water or other liquid that involves a risk of drowning.	<input type="checkbox"/> involves diving work.

## ANY HIGH-RISK MACHINERY OR EQUIPMENT NEARBY

<input type="checkbox"/> Forklift	<input type="checkbox"/> Crane/s	<input type="checkbox"/> Hoist/s	<input type="checkbox"/> Excavator	<input type="checkbox"/> Backhoe/Loader	<input type="checkbox"/> Boom Lift	<input type="checkbox"/> EWP	<input type="checkbox"/> Genie Lift
<input type="checkbox"/> Trencher	<input type="checkbox"/> Drilling Rig	<input type="checkbox"/> Trucks	<input type="checkbox"/> Formwork	<input type="checkbox"/> Bobcat	<input type="checkbox"/> Flammable Gas	<input type="checkbox"/> Fuel	<input type="checkbox"/> Dozer
<input type="checkbox"/> High Voltage	<input type="checkbox"/> Mulcher	<input type="checkbox"/> Tilt-up Panels	<input type="checkbox"/> Roller	<input type="checkbox"/> Scissor Lift	<input type="checkbox"/> Tractor	<input type="checkbox"/> Other -	

RISK MATRIX										
LIKELIHOOD	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC	SCORE	ACTION	HEIRARCHY OF CONTROLS		
ALMOST CERTAIN	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4 ACUTE			<b>Elimination</b> Remove the hazard.		
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4A ACUTE	DO NOT PROCEED	<b>Substitution</b> Replace the hazard.		
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	<b>Isolation</b> Isolate People from the hazard		
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	2M MODERATE	Ensure control measures in place.	<b>Engineering</b> Isolate the hazard.		
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH	1L LOW	Monitor and keep records	<b>Administrative</b> Change the work.		
<b>Notes on Hierarchy of Controls:</b> Elimination methods are the most effective and preferred when controlling a hazard. Substitution is the second most effective method of controlling a hazard. Engineering by isolation is the third most effective, while Administrative Controls by changing the work is the fourth most effective method. PPE (Personal Protective Equipment) is the least effective method.										
<b>PERSONAL PROTECTIVE EQUIPMENT (PPE)</b>										
FOOT PROTECTION	HAND PROTECTION	HEAD PROTECTION	HEARING PROTECTION	RESPIRATORY PROTECTION	FACE PROTECTION	HIGH-VIS CLOTHING	PROTECTIVE CLOTHING	FALL PROTECTION	SUN PROTECTION	HAIR/JEWELLERY SECURED
										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Select the appropriate PPE above suitable for the equipment used or the job task being performed (if applicable).										
<p><b>Note:</b> A SWMS must be reviewed regularly to make sure it remains effective. A SWMS must be reviewed (and revised if necessary) if relevant control measures are revised. The review process should be carried out in consultation with workers (including contractors and subcontractors) who may be affected by the operation of the SWMS and their health and safety representatives who represented that work group at the workplace.</p> <p>When a SWMS has been revised, the person conducting a business or undertaking must ensure all:</p> <ol style="list-style-type: none"> <li>persons involved in the work are advised that a revision has been made and how they can access the revised SWMS;</li> <li>persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS; and,</li> <li>workers that will be involved in the work are provided with the relevant information and instruction that will assist them to understand and implement the revised SWMS.</li> </ol>										

JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR	RESPONSIBLE PERSON
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
1. Preparation	Inadequate operator training, Unsafe work area	2M	<ul style="list-style-type: none"> <li>- Ensure all forklift operators have completed a certified and recognized training course before they begin operation.</li> <li>- Conduct regular refresher courses and competency assessments to keep operators' skills up-to-date and in line with industry standards.</li> <li>- Implement a thorough induction process when introducing new operators into the workplace, covering specific hazards, workplace rules, and emergency procedures.</li> <li>- Define clear boundaries for the work area, using appropriate signage and barriers to restrict access to trained personnel only.</li> <li>- Keep the work area clear, dry, and free from obstacles, spillages, or debris that may increase the risk of accidents, slips, or trips.</li> <li>- Conduct regular inspections of the work area to identify any potential hazards, such as uneven surfaces or poorly-maintained equipment.</li> <li>- Develop and implement a system for reporting hazards or incidents, ensuring staff are aware of their responsibility to report any unsafe conditions or procedures immediately.</li> <li>- Provide adequate personal protective equipment (PPE) to all workers operating within the work area, including high-visibility clothing, hearing protection, and safety footwear.</li> <li>- Regularly review operating procedures, maintaining a strong emphasis on safe working practices and hazard control.</li> <li>- Ensure adequate supervision is provided at all times during forklift operation and maintain an open communication line between operators and their supervisors, encouraging discussion about potential risks and solutions.</li> <li>- Continuously assess the overall safety culture within the organisation, providing ongoing education and training opportunities to drive improvement and encourage a proactive approach to workplace health and safety.</li> </ul>	1L	
2. Pre-operational inspection	Malfunctioning components, Damaged equipment	2M	<ul style="list-style-type: none"> <li>- Conduct a comprehensive pre-operational inspection of the forklift, ensuring all components are in good working condition and free from any visible damage or wear that could affect performance.</li> <li>- Verify that gas and fuel lines are securely connected, with no leaks or loose fittings, and that fuel levels are sufficient for the intended work duration.</li> <li>- Inspect tires for any signs of damage, such as cuts, punctures, or excessive wear, and ensure they are properly inflated to the recommended pressure.</li> <li>- Test all forklift controls, including steering, brakes, lifting mechanisms, and warning devices for proper functioning and responsiveness. Report and address any issues immediately.</li> </ul>	1L	

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			<ul style="list-style-type: none"> <li>- Check the condition of the battery and charging system to ensure there is adequate power to operate the forklift safely for the entire shift.</li> <li>- Examine the operator's compartment for cleanliness, obstructions, or any items that could pose a risk to the safe operation of the forklift. Make necessary adjustments as needed.</li> <li>- Review the relevant safety documentation, such as the Safe Work Method Statement (SWMS) and manufacturer guidelines, before proceeding with the tasks.</li> <li>- Regularly maintain and service the forklift in accordance with the manufacturer's recommendations and Australian standards, keeping a detailed record of maintenance activities.</li> <li>- Provide comprehensive training to all personnel responsible for operating the forklift, specifically addressing the hazards associated with malfunctioning components and damaged equipment, as well as the appropriate control measures to be implemented.</li> <li>- Ensure that only competent and authorised personnel are permitted to operate the forklift, and that their competency is regularly reassessed to guarantee safe and efficient operation.</li> <li>- Implement an ongoing reporting system for workers to communicate any potential hazards or issues related to the equipment, and have a process in place for promptly addressing these concerns.</li> <li>- Establish an emergency response plan in case of accidents or incidents involving the forklift, including procedures for notifying appropriate authorities, securing the area, and conducting an investigation to identify and mitigate any similar risks in the future.</li> </ul>		
3. Refueling/Changing gas cylinder	Gas leaks, Fire or explosion	3H	<ul style="list-style-type: none"> <li>- Conduct regular inspections of gas cylinders and connections to ensure they are in good condition without any signs of wear or damage.</li> <li>- Ensure that only trained and certified personnel are allowed to refuel or change gas cylinders on forklifts.</li> <li>- Store gas cylinders in a well-ventilated area away from open flames, heat sources, or areas with high risk of static electricity discharge.</li> <li>- Always shut down the forklift engine before refueling or changing the gas cylinder.</li> <li>- Follow manufacturer guidelines for handling and storage of gas cylinders, including ensuring they are stored and transported upright.</li> <li>- Equip forklifts with appropriate fire extinguishers and ensure all operators are trained in their use.</li> <li>- Provide personal protective equipment (PPE) like gloves, eye protection, and face shields for workers involved in refueling or changing gas cylinders.</li> <li>- Educate workers on the hazards and risks associated with gas leaks, fire, and explosion and provide training in emergency procedures.</li> </ul>	2M	

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			<ul style="list-style-type: none"> <li>- Implement a routine maintenance schedule for all forklifts, focusing on the fuel system, including gas lines, valves, and seals.</li> <li>- Develop clear procedures for identifying and reporting gas leaks, and train employees on how to safely respond to these situations.</li> <li>- Display appropriate safety signage around gas storage and refueling areas, reminding workers of the hazards and necessary precautions.</li> <li>- Ensure the presence of adequate ventilation systems in areas where gas refueling or cylinder changes take place to reduce the accumulation of potentially dangerous gases.</li> <li>- Have readily accessible spill kits containing non-sparking tools and absorbent materials, in case of accidental gas spills during refueling or cylinder changes.</li> <li>- Regularly review and update the Safe Work Method Statements (SWMS) for working with forklifts, gas and fuel to ensure current best practices are being followed and to identify potential improvements in safety.</li> </ul>		
4. Load handling	Overloading, Poorly stacked materials	3H	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	2M	

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5. Travelling without load	Pedestrian collisions, obstructed view	3H		2M	

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			<div></div> <div></div> <div></div> <div></div>		
6. Picking up a load	Falling loads, Unstable load	3H	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>	1L	



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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
7. Travelling with a load	Collision with object or person injuries 2M			1L	

JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR	RESPONSIBLE PERSON
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<div></div> <div></div> <div></div> <div></div> <div></div>		
8. Placing a load	Crushed hands/fingers, Falling loads	3H	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>	2M	

[illegible]

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			<div></div> <div></div> <div></div> <div></div> <div></div> <div></div>		
10. Battery charging/maintenance	Battery acid spills, Electrical shock	3H	<div></div> <div></div> <div></div> <div></div> <div></div>	2M	



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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>		
12. Emergency response	Inadequate communication, Delayed response	2M	<div></div> <div></div> <div></div>	1L	

[illegible]

## EMERGENCY RESPONSE – CALL 000 FOR EMERGENCIES

Ensure to have an Emergency Management Plan in place as well as adequate numbers of trained first aid staff with easy access to fully stocked first aid kits, rescue equipment, material safety data sheets, adequate access to emergency communication equipment and fire-fighting equipment suitable for all classes of fire and ignition sources.

## LEGISLATIVE REFERENCES

RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES IF ANY STATE THAT ARE NOT APPLICABLE

### Queensland & Australian Capital Territory

Work Health and Safety Act 2011

Work Health and Safety Regulations 2011

Legislation QLD: <https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws>

Codes of Practice QLD: <https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice>

Legislation ACT: <https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations>

Codes of Practice ACT: <https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice>

### Victoria

Occupational Health and Safety Act 2004

Occupational Health and Safety Regulations 2017

Legislation VIC: <https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations>

Codes of Practice VIC: <https://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice>

### New South Wales

Work Health and Safety Act 2011

Work Health and Safety Regulations 2017

Legislation NSW: <https://www.safework.nsw.gov.au/legal-obligations/legislation>

Codes of Practice NSW: <https://www.safework.nsw.gov.au/resource-library/list-codes-of-practice>

### Western Australia

Work Health and Safety Act 2020

Work Health and Safety Regulations 2022

Legislation Western Australia: <https://www.commerce.wa.gov.au/worksafe/legislation>

Codes of Practice WA: <https://www.commerce.wa.gov.au/worksafe/codes-practice>

### Northern Territory

Work Health and Safety (National Uniform Legislation) Act 2011

Work Health and Safety (National Uniform Legislation) Regulations 2011

Legislation NT: <https://worksafe.nt.gov.au/laws-and-compliance/workplace-safety-laws>

Codes of Practice NT: <https://worksafe.nt.gov.au/laws-and-compliance/codes-of-practice>

### Safe Work Australia Links

Law and Regulation (All States): <https://www.safeworkaustralia.gov.au/law-and-regulation>

Model Codes of Practice: <https://www.safeworkaustralia.gov.au/resources-publications/model-codes-of-practice>

### Model Codes of Practice

- Managing noise and preventing hearing loss at work
- Confined spaces
- Labelling of workplace hazardous chemicals
- Managing risks of hazardous chemicals in the workplace
- Welding processes
- First aid in the workplace
- Managing the risk of falls at workplaces
- Hazardous manual tasks
- Managing the risk of falls in housing construction
- Managing electrical risks in the workplace
- Demolition work
- Excavation work
- Work health and safety consultation, cooperation and coordination
- Managing the work environment and facilities
- How to manage work health and safety risks
- Managing risks of plant in the workplace
- Construction work

### South Australia

Work Health and Safety Act 2012 (SA)

Work Health and Safety Regulations 2012 (SA)

Legislation for SA: <https://www.safework.sa.gov.au/resources/legislation>

Codes of Practice for SA: <https://www.safework.sa.gov.au/workplaces/codes-of-practice#COPs>

### Tasmania

Work Health and Safety Act 2012

Work Health and Safety (Transitional and Consequential Provisions) Act 2012

Work Health and Safety Regulations 2012

Work Health and Safety (Transitional) Regulations 2012

Legislation for TAS: <https://worksafe.tas.gov.au/topics/laws-and-compliance/acts-and-regulations>

Codes of Practice for TAS: <https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice>

Details of permits, licenses or access required by regulatory bodies (add or delete as required):

- Permits from local council
- Authorisation to commence work
- Any required documents.



## SIGNATORIES OF THE SAFE WORK METHOD STATEMENT

The signed and dated personnel listed below have cooperated in the consultation and development of this Safe Work Method Statement which has been approved by the Person/s Conducting a Business or Undertaking (PCBU). In signing this Safe Work Method Statement each individual acknowledges and confirms that they have read this SWMS in full, having raised any questions for items on this Safe Work Method Statement that require clarification, and confirms that they are competent, skilled and knowledgeable for the task assigned to them. Every person acknowledges that they have received the relevant training and qualifications where required, before carrying out any work contained in this Safe Work Method Statement. By signing this Safe Work Method Statement each individual agrees to work safely, to follow any safe work instructions which are provided, and agrees to use all Personal Protective Equipment where appropriate.

Worker Name	Position	Signature	Date	Time	Supervisor
			Date:		
			Date:		
			Date:		
			Date:		
			Date:		
			Date:		
			Date:		

## SAFE WORK METHOD STATEMENT MONITORING AND REVIEW

**The SWMS must be reviewed regularly** to make sure it remains effective and must be reviewed (and revised if necessary) if relevant control measures are needed. The review process should be carried out in consultation with workers (including contractors and subcontractors) who may be affected by the operation of the SWMS and their health and safety representatives who represented that work group at the workplace.

When the SWMS has been revised the PCBU must ensure that all persons involved with the work are advised that a revision has been made and how they can access the revised SWMS, including all persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS. All workers that will be involved in the work must be provided with the relevant information and instruction that will assist them to understand and implement the revised SWMS.

**The SWMS must be monitored regularly** for the effectiveness of ensuring hazard controls are effective in reducing the risk of incidents, keeping the workplace safe for all personnel. The person responsible for monitoring the effectiveness of the Safe Work Method Statement should employ a multi-faceted approach which includes but is not limited to:

1. Spot Checks.
2. Consultation with workers, contractors and sub-contractors.
3. Internal audits on a continual basis.

An approach of continuous improvement, promptly recording inconsistencies or deficiencies, followed up by immediate corrective action and consultation with all relevant personnel ensures that the PCBU is consistently developing ever-improving systems of safe work principles.

REVIEW NUMBER	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
NAME							
INITIALS							
DATE							

## SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

This Safe Work Method Statement Review Checklist is to be followed and used upon initial development of the SWMS to help ensure that all steps have been adequately taken before work commences. Think of this document as an internal audit review checklist before commencing work, and may form part of a Toolbox Talk (safety meeting) and may be used as an opportunity for education and training.

ITEMS WHICH MUST BE INCLUDED IN THE SWMS	COMPLETED	TO BE DONE	COMMENTS
The company details have been entered, including the project name and address.	<input type="checkbox"/>	<input type="checkbox"/>	
Names and signatures of all relevant personnel consulted during the development of the SWMS.	<input type="checkbox"/>	<input type="checkbox"/>	
Name, signature, position and date signed of the person approving the SWMS.	<input type="checkbox"/>	<input type="checkbox"/>	
Specific personnel and qualifications, experience is noted in the SWMS.	<input type="checkbox"/>	<input type="checkbox"/>	
Provides a step-by-step process of tasks required to carry out the activity or task.	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate risk assessment of any identified hazards has been completed.	<input type="checkbox"/>	<input type="checkbox"/>	
Foreseeable hazards are identified and documented for each step.	<input type="checkbox"/>	<input type="checkbox"/>	
Any hazards listed in any site risk assessments have been added to the SWMS.	<input type="checkbox"/>	<input type="checkbox"/>	
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.	<input type="checkbox"/>	<input type="checkbox"/>	
Check control measures added to the SWMS are the most effective solutions.	<input type="checkbox"/>	<input type="checkbox"/>	
Responsible person is assigned and listed on the SWMS for the implementation of control measures.	<input type="checkbox"/>	<input type="checkbox"/>	
Permit requirements specified, such as Hot Work, Electrical Work, Work at Heights etc.	<input type="checkbox"/>	<input type="checkbox"/>	
SWMS identifies plant and equipment to be used.	<input type="checkbox"/>	<input type="checkbox"/>	
Details of inspection checks required for any equipment listed are noted on the SWMS.	<input type="checkbox"/>	<input type="checkbox"/>	
Describes any mandatory qualifications, experience, training, skills required to perform the work.	<input type="checkbox"/>	<input type="checkbox"/>	
Applicable personal protective equipment is selected on the SWMS.	<input type="checkbox"/>	<input type="checkbox"/>	
Lists any required permits or licenses.	<input type="checkbox"/>	<input type="checkbox"/>	
Reflects and documents any legislative references and/or Australian Standards.	<input type="checkbox"/>	<input type="checkbox"/>	
Identifies any hazardous substances used with specific control measures in line with any SDS.	<input type="checkbox"/>	<input type="checkbox"/>	
REVIEWED BY	DATE REVIEWED		
SIGNATURE	DATE COMPLETED		