

Risk Assessment Method Statement (RAMS)

Warning

Keep out





An tÚdarás Sláinte agus Sábháilteachta Health and Safety Authority



Introduction

This RAMS template is broken into 3 steps and 8 sections and should be developed in line with the associated guidance summarised below.

Initia

Development

develops the RAMS, which

should be based on local

associated with the work,

RAMS, it is sent to the PSCS

conditions and hazards

on completion of the

(where appointed) for

review and comment.

Responsible person(s) on

behalf of the employer:

and

3 Step Process

Follow the 3 Step Process to ensure the RAMS contains up to date information.

RAMS Template -8 Sections

The RAMS template consists of 8 sections, and these should be completed as necessary.

When completing the RAMS, it is important to note that the hazards, associated risks, local conditions, system of work, resources, equipment and competencies required may change and this must be reflected and updated in the RAMS.

Section 1	Contractor Details
Section 2	Site and Work Activity Information
Section 3	Method of Work
Section 4	Training Requirements
Section 5	Personal Protective Equipment (PPE)
Section 6	Emergency Procedures and Welfare Requirements
Section 7	Risk Assessment Method Statement Sign Off
Section 8	Appendices / Additional Information

Pre-Start

Review

& Sign Off

reviewed and agreed with

the PSCS prior to starting

updated where required so

any changes to the system

of work, equipment or

personnel, and

signed off by all stakeholders including responsible person, PSCS

and worker(s).

as to reflect local conditions,

Responsible person must

ensure that the RAMS is:

work.

Ongoing

Assessment

After work starts, if the work

activity changes significantly

changes to the system of

Responsible person(s) must

amend the RAMS and go

due to:

- local issues,

new hazards,

work, and

back to Step 2.

training.

Risk Assessment Method Statement (RAMS) Template

2



PSCS Company Name: PSCS Representative Name

Phone:

Risk Assessment Method Statement (RAMS) Template

Date:		RAMS Number:		Revision Number:
Risk Assessment Method Statement for:				ent for:
	Section 1 Contractor D	etails		
Company Na	me:			
Company Ad	dress:			
Responsible	Person:			
Phone:				
Email:				
RAMS Developed By Name:				
Phone:			Email:	

	Section 2	Section 2					
	Site and Wo	rk Activity Information					
Project Title	:						
Site Address	/ Location:						
Brief Descri	otion of Work to b	e Carried Out:					
Specific Wo	rk Location:						
Estimated N	o of Workers:						
Estimated D (Include Sta	uration of Works rt / End Dates):						
PSCS Appoi	ntments						
Has a PSCS I	been appointed?	Yes No					

Email:



Date:		RAMS Number:	Revision Number:						
	Soction 2								
┌╚┈ ┇┌┇ └त┈	Section 5	(include cafety controls measures and equipment re-	auirad)						
	2 1 Develop a safe system of work								
	(Describe in steps from	3.1 Develop a safe system of work (Describe in steps from start to finish how the work will be done safely). Attach drawings / sketches etc. if required.							



Date:		RAMS Number:	Revision Number:		
_⊡	Section 3 Method o	of Work			
じ ァし 노ල…	3.1 Develop a saf (Describe in steps fro	e system of work <i>Continued</i> m start to finish how the work will be done safe	lv). Attach drawings / sketches etc. if required.		



Date:		RAMS Number:	Revision Number:		
\wedge	Section 3 Method	of Work			
	3.2 List the Hazar	ds and Identify Site Specific Risk Asses	ssments	r	
Hazard				Site Specific Risk Assessment Available (Tick if applicable and include in appendices)	

Section 3 Method of Work

00	3.3. List Pla	nt, Key lools and Essential Eq	luipment Re	quired		
List Plant, Key	Tools and Esser	ntial Equipment		Insert Serial Numbe	er for Statutory Equipment*	
*Statutory Certificate Section 8 Appendic	*Statutory Certificates and Thorough / Weekly Examinations must be available locally. Tick where the information will be contained i.e. with the PSCS / in your equipment register, listed above or contained in Section 8 Appendices. This list must be checked before the work starts by the responsible person and updated / reviewed on a regular basis					
PSCS		Equipment Register	Section 8 App	bendices		

Equipment Register	Section 8 Appendices

. .

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Date:		RAMS Number:		Revision Number:		
ر گ ا	Section 3 Method	of Work				
(-) *==	3.4 Examination and Inspection of Equipment					
*Examination / ins	*Examination / inspection certificates must be available locally (e.g.) with the PSCS / in your inspection register or contained in Section 8 Appendices and tick if applicable.					
Excavations	(AF3)					
Scaffolding	Scaffolding (GA3)					
Work at Hei	Work at Height Equipment (GA3) e.g. ladders, MEWP, handrails, netting, harnesses					
Personal Floatation Devices (AF4)						
Comments	Comments					



Section 3 Method of Work 3.5 Permit(s) to Work

Permit Type	Tick if applicable and include information in appendices	Add Permit Number (If known)
Permit to Dig		
Confined Spaces		
Hot Works		
Road Opening		
Electrical / Energisation / Lock Out Tag Out		
Work at Height		
Other		

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Section 3 Method of Work

3.6 Chemicals

List chemicals identified and ensure Safety Data Sheet (SDS) are available and instructions followed in safe use (e.g. PPE, storage etc.) Safety Data Sheets must be available locally e.g. with the PSCS / in your chemical register or contained in Section 8 Appendices. This list must be updated and checked on the day before the work starts.

Chemical Name	Safety Data Sheet (tick if available)
Storage Arrangements	



Date:		RAMS	Number:		Revisio	on Number:		
	Section 3 Me	ethod of Work	(
	3.6 Chemica	als Continuec	1					
List Hazardo	us Substances an	d Identify Risk	s Below. Tick if a	pplicable.				
			\Diamond					
Explosives	Flammable	Oxidising	Gas Stored Under Pressure	Corrosive	Acute Toxicity	Health Hazards	Serious Health Hazard	Hazardous to the Environment
	Continue 2 Ma							
	2 7 Llorondo							
~~>>	5./ Hazardo	bus Substanc	es					
Hazardous S	ubstances						Site Specific Ris Available (Tick if applicable ar appendices)	sk Assessment
Asbestos								
Silica Dust (e.c	g. Cutting concre	te)						
Wood Dust								
Solvents (e.g.	White spirit, acet	tone)						
Mineral Fibres	s (e.g. Rockwool)							
Fumes (e.g. W	/elding / Genera	itors)						
Isocyanates (e	e.g. Painting)							
4								

Section 4

CONSTRUCTION

ADVISORY COMMITTEE

Identify and Select Your Training Requirements

(Note this should be identified from your method of work as outlined in Section 3.0)

Safe Pass	Tower crane	
Slinging/ signalling	Tractor/dozer	
Crawler crane	Site dumper	
360° excavator	Shotfiring	
Roof and wall cladding/sheeting	Signing, lighting and guarding on roads	
Scaffolding	Self-erect. tower crane	
Telescopic handler	Mobile crane	
Articulated dumper	180° excavator	
Mini-digger	Built-up roof felting	
Locating under-ground services	Health and safety at roadworks	
Mobile Tower Scaffold		



Date:			RAMS Num	oer:			Revision Num	ber:		
<u> </u>	Section 4	4 Identify a	nd Select Yo	our Training	g Requirem	ents				
æ	4.2 Oth	er Training	I							
Manual hanc	dling				Work at	height / M	EWP			
Fire safety					Confine	ed space				
This information (nichecked on the da	ame / card number y before the work Sectio Persona	r / expiry / certifica starts	te) must be availabl	e locally (e.g. with	the PSCS / in your	licable	r contained in Secti	ion 8 Appendices).	This list must be up	dated and
		1	1		1			1	1	
Foot Protection	Hearing Protection	High Visibility	Head Protection	Eye Protection	Face Protection	Hand Protection	Protective Clothing	Respiratory Protective Equipment	Safety Harness	Rings, Watches, Jewellery that may become entangled must not be worn. Long and loose hair must be tied back

Other PPE Required:

o A	Section 6
G	Emergency Procedures and Welfare Requirements
	6.1: Rescue Plan e.g. Work at Height, Confined Spaces If required please include in appendix
	6.2: Emergency Procedures (999 / 112)
	Is this information already with the PSCS and / or covered in the site induction or populated on the site notice board? Please tick to confirm If Yes , continue to next section. If No, complete section below
Name of Firs Aid Respond	rst der: Mobile Number:
First Aid Box	x Stocked and Available: Please click to confirm
Location of F	First Aid Box:
Address of N	Nearest Hospital / Doctor:
Nearest Hos	spital / Doctor Phone Number:



Date:	RAMS Number:		Revision Num	ber:
Sect	ion 6 Emergency Procedures a	nd Welfare Requirement	ts	
6.2:	Emergency Procedures (99	9 / 112) Continued		
Location of Nearest	Assembly Point:			
Person Responsible	for Reporting of Accidents and Da	ingerous Occurrences:		
Name:			Phone:	
Email:		·		
Utility Providers Contact Numbers:	ESB Networks: 1800 372 999	Gas Networks Ireland: 180	00 20 50 50	Irish Water: 1800 278 278
Other Emergency R	esponse Equipment Required (e.g	. AED, Lifelines):		
Sect 도고 6.3:	ion 6 Emergency Procedures a Welfare Requirements Req	nd Welfare Requirement	ts	

Toilet	
Canteen	
Drying Room	
Other (Blank)	

|--|--|

Section 7

Risk Assessment Method Statement Sign Off

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7.1: Person(s) Responsible for Managing and Supervising Work

I have read or had it explained to me, and understood this RAMS. The RAMS reflects local on-site conditions and I am satisfied that it is safe to start work. I will so far as is reasonably practicable ensure that the work will be carried out in accordance with the measures outlined during the works. Where any significant changes are required the work will be stopped and the RAMS will be revised and resubmitted for review by the PSCS before recommencing works.

Print Name:	Print Name:	Print Name:
Signed:	Signed:	Signed:
Role:	Role:	Role:
Contact No.:	Contact No.:	Contact No.:
Email:	Email:	Email:
Date:	Date:	Date:



Date:

RAMS Number:

Revision Number:

Section 7 Risk Assessment Method Statement Sign Off

7.2: Project Supervisor Construction Stage - PSCS (where appointed)

I (Insert Name)

have read and understood this RAMS, or had it explained to me. I am satisfied that it is safe (so far as is reasonably practicable) to allow the work to commence based on the information provided and that it reflects local on-site conditions including the ongoing coordination / cooperation with other contractors.

Print Name:	Print Name:	Print Name:
Signed:	Signed:	Signed:
Role:	Role:	Role:
Company:	Company:	Company:
Contact No.:	Contact No.:	Contact No.:
Email:	Email:	Email:
Date:	Date:	Date:



Revision Number:

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Section 7 Risk Assessment Method Statement Sign Off

Date:

7.3: Risk Assessment Method Statement Workers Briefing

I have read and understood this RAMS, or had it explained to me, and I will fully comply with all safety measures. If the work activity changes <u>significantly</u>, I will notify the Person Responsible for Managing and Supervising Work (Insert Name) and ask for an amended RAMS. I have also been afforded the opportunity to add any feedback / comments below.

RAMS Number:

No. 1	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 2	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 3	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 4	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 5	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 6	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 7	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 8	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 9	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)
No. 10	Name	Company		Translator (Name)
	Signature	Date	Briefing Given by (Signature)	Translator (Signature)

Feedback



Date:		RAMS Number:		Revision Number:		
	Section 8	Additional Informat	tion Required (SH	nould be available locally for reference and	viewing)	
Drawings / Sketo	:hes					
Risk Assessments	(Based on Hazards	Identified)				
Statutory Certific	ation / Inspection R	ecords for Plant and Equi	pment			
Permits to Work						
Temporary Work	S					
Training Register	(CSCS / Safe Pass) C	Other				
Chemical / Safet	y Data Sheets (SDS)	Register				
Lift Plan						
Rescue Plan						



Date:

RAMS Number:

Revision Number:

Section 8 Continued

Appendices / Additional Information Required (Should be available locally for reference and viewing)

Additional Information:





Machine	360 Tracked E	xcavator	RA No WL RA0006	
SAFE SYSTEMS OF WOR	K	Associated Safe use and operation sheet WL MS0006		
Review Date		Issue 2		
SPECIFIC ASSESSMENT CON	NTROL MEASURES I	NCLUDED		
Risks involved in the Sa	fe use and operat	ion of 360 Tracked Excav	vators	
BE CA	REFUL	BE SAFE	BE ALERT	
Prepared By: J	ohn Jackson	Date 23/1	10/2014	
Passed for briefing By:		Date		

Risk Assessment

	Not Likely; sr	e of the task	l ikelihoo				
	it is unlikely t		Lincinioo				
1.	Possible; du	ring the task or	ccurrence co	ould happen			
2.	Likely; an ev	en chance off i	incident duri	ng the task v	vhilst		
	performing th	nis operation				_	
3.	Probable; an	incident will h	appen at soi	me point whi	lst		
	performing th	nis operation					
4.	Certainty; im	minent chance	e of incident				
				-		-	
1.	Negligible; in	jury not requir	ing first aid,	damage to p	roperty not		
	requiring rep	air				Severity	
2.	Minor; injury	requiring first a	aid provision	i, minor repa	irs to		
	property					_	
3.	Moderate; 3	day + lost of til	me to injury,	damage that	t ceases		
4	operation					_	
4.	Serious; maj	or injury that c	could also lea	ad to single i	ratality,		
~	major damag	je to property			ve ve el	-	
Э.	Major; one o	r more ratalitie	s, property c	amaged bey	/ond		
RISK			2	3	Δ	5	
		Not Likely	Possible	Likely	Probable	Certainty	
1.	Negligible	1	2	3	4	5	
2.	Minor	2	4	6	8	10	
3.	Moderate	3	6	9	12	15	
4.	Serious	4	8	12	16	20	
5.	Major	5	10	15	20	25	

Risk Assessment

Risk Table

1-3 Negligible Risk	Process may proceed but must be advised on induction and annually thereafter
4-7 Low Risk	Process may proceed but must be advised on induction annually and inspections made thereafter
8-14 Moderate Risk	Work Must cease and further controls applied
15-20 High Risk	Work must cease and further controls must be employed to reduce the risk prior to recommencement
20+ Intolerable Risk	Work must cease and further controls must be employed to reduce the risk prior to recommencement

By taking the severity rating number and multiplying it by the Likelihood rating number will give you the Risk Rating from the Risk Key Table. Once the overall rating has been established this should be referenced

Risk Number	Hazard	Hazard effect	Hazard Effects who	S	L	IRR	Control Measures	L	S	RRR
1	Plant operations	Injury death	Operator Workforce public	4	4	16	Only competent operators to use equipment. Appropriate quick hitch training carried out. All equipment to be checked before use and a record kept. Defect reporting procedure in place. Operator to park up if safety critical fault is found. Seat belts to be worn at all times when operating machinery. Reversing cameras must work if fitted. All mirrors to be in good order, clean and correctly adjusted to give maximum views. Audible alarms must work where fitted. Flashing beacons to be fitted and working. Mobile phone use prohibited when operating machinery. No smoking in company vehicles Care to be taken on steep slopes(check manufactures guidelines)	1	4	4
2	Public Interface	Injury death	public	4	4	16	If a member of the public enters a site stop work and inform supervisor.	1	4	4

Risk Assessment

Risk number	hazard	Hazard effect	Hazard Effects who	S	L	IRR	Control measures	L	S	RRR
3	Traffic Interface	Injury death	Operator Workforce public	4	4	16	One way system to be used. Flashing beacons to be fitted and working. Reversing kept to a minimum.	1	4	4
4	Noise	injury	Operator Workforce public	2	4	8	Use silenced equipment. Do not sound horn, unless necessary to warn others.	1	2	2
5	Dust	injury	Operator Workforce public	2	4	8	Monitor dust daily. Inform supervisor who will arrange to damp down dust if required.	1	2	2

Risk number	hazard	Hazard effects	Hazard Effects who	S	L	IRR	Control measures	L	S	RRR
6	Loading	Injury death	Operator Workforce public	4	4	16	If a member of the public enters a site stop work and inform supervisor. Always load trucks from the back or the side - never over the cab. Make sure nobody stands between the loading vehicle and the truck. Loading should be even, side to side and back to front. Where possible Avoid loading materials which will stick to the skip when tipping. Make sure loads are trimmed so material does not fall off during transport.	1	4	4
7	Under Ground services	Injury death	Operator workforce	4	1	4	Cat scan must be carried out before excavations commence Trial holes must be dug Visual assessment of area for any signs of manhole covers etc.	1	4	4
8	Overhead cables	Injury death	Operator Workforce public	4	4	16	Overhead cables are visually obvious. Always travel on designated routes. Never operate 360 Track machine under overhead cables unless height restrictors are fitted.	1	4	4

Risk Assessment

Risk number	hazard	Hazard effects	Hazard Effects who	S	L	IRR	Control measures	L	S	RRR
9	Climbing on and off machines	Injury death	operator	4	4	16	Climb on and of using only manufacturers hand and footholds. Maintain 3 points of contact at all times. Face the machine while climbing on and off. Park the machine where easy access to the cab is afforded Make sure all hand and foot holds are clears of mud and debris. Make sure you have the correct footwear, with suitable grip / tread which is free from mud and debris.	1	4	4
10	Lifting operations	Injury death	Operator workforce	4	4	16	Only lift using the correct lifting points on the machine All machines checked annually and certified by competent body Never stand under a suspended load Only competent personnel to work in any lifting operations	1	4	4

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11	Generic control			All persons will be competent for the work they are to carry out Young or inexperienced workers will be supervised Reckless behaviour will not be tolerated All hazards will be reported to the supervisor with immediate effect Adequate fire and first aid arrangements are to be in place regular maintenance and housekeeping is prioritised. All defects are reported to supervisor with immediate effect. If during the working day an operative is unsure about the work in hand, they should stop and seek advice from the supervisor			
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Western Lakes Ltd Risk Assessment

Sign on Record

I understand that I have access to the Safe System of Work incorporating A Method Statement and Risk assessment file and agree to ensure that I aid my employer in meeting my duties to ensure safety for the business and all its relevant person/s as it is my legal duty.

I have read the method statement and supporting documents, I understand them, I understand my role and will work in a safe manner

Name (Please Print)	Date	Signature	Name (Please Print)	Date	Signature

Name (Please Print)	Date	Signature	Name (Please Print)	Date	Signature

Name (Please Print)	Date	Signature	Name (Please Print)	Date	Signature

SAFE SYSTEM OF WORK

SAFE USE AND OPERATION OF **360** TRACKED EXCAVATOR

Issue 1

BE CAREFUL

BE SAFE

BE ALERT

WL MS 0006

Amendment Record

Issue No.	Amendment	Prepared by	Checked by	Date
1				5/7/13
2		John Jackson		23/10/2014

Review Date......October 2014

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1.0 Scope of the Works

This safe system of work describes how to safely operate a 360 Tracked Excavator.

2.0 References

Operators manual,

Manufacturers recommendation's

Takeuchi TB125, Takeuchi TB135, Takeuchi 153FR, Takeuchi 175 Takeuchi TB180FR, Takeuchi TB285, Case CX 130B, Case 135SR, Case CX 180 Case CX 330, Case 9046, Hyundai 140, Hyundai R27-Z-9, JCB JS210, JCB JS220, JCB JZ235, JCB JS330, Kubota KX35-2

3.0 Hazards Identified

- 1. Plant and Equipment
- 2. Public interface
- 3. Traffic interface
- 4. Noise
- 5. Dust
- 6. Loading
- 7. Underground services
- 8. Overhead services
- 9. Climbing on and off equipment
- 10. Lifting operations

4.0 Personnel

Driver to have been assessed as competent

5.0 Plant & Equipment

360 Tracked Excavator

6.0 Materials

Oils and grease Diesel

7.0 Personnel Protective Equipment

Mandatory PPE

High Visibility Clothing Safety Footwear

Additional PPE Site specific

8.0 Planning

Safe system off work Risk Assessments Pre start checks Defect reporting

9.0 Temporary Works

Not Applicable

10.0 Work Area & Access / Egress

As detailed in the site induction.

11.0 Public Interface

As detailed in the site induction.

12.0 Method of Works

Operator to have been assessed as competent for the Machine they are driving. A copy of the driving instructions for the make and model of machine will be available in the operators manual, which will be kept in the cab at all times. The operator will familiarise themselves with specific operational information contained in the manual. If the operator is still unsure of any specific operational procedure on the machine, The machine must not be operated until any familiarisation training needed is carried out, by a competent person.

Operator to check that the machine is within its service hours – next service due stickers are displayed in the cab.

Operator to check the machine before starting work and complete the pre start checks and fill in the appropriate log sheets.

All faults to be reported to: Whinbank Farm 01946 830305.

The fault will be logged and then action taken to fix the fault.

If the fault is safety critical the machine will be parked up and isolated until the fault is repaired.

Once the pre start checks are completed the machine can be put into service following some basic guidelines.

The 360 track Machine –

- CAT scan and trial holing must be carried out prior to any digging operations in virgin ground.
- Permit to work must be sought before any excavations commence.
- Operator must wear a seat belt if fitted.
- Operator to attend site specific induction before carrying out works.

- Must avoid digging under overhead cables, unless the proper precautions have been taken, height restrictor fitted to the machine.
- Operator must park the machine on firm level ground, lower the bucket to the ground, switch off the engine and remove the keys before leaving the cab, then isolate the machine, taking care that no access or exits are blocked, and emergency routes are kept clear.
- Operator must not use mobile phone when operating the machine.
- Operator must make sure the area is clear of personnel before operating the machine.
- Do not position the excavator too close to trenches as the sides can collapse.
- Care to be taken when operating on slopes.
- When loading vehicles never load over the cabs.
- All operatives to be trained in appropriate quick hitch training.

Servicing and Inspections

Each 360 Excavator will be allocated a unique plant number.

All pre start checks, Service and repair records will be kept in a file in the plant office. The Machine should be serviced in accordance with the manufacturer's recommendations. If for any reason we vary from this, then a written record explanation should be kept in the machine file.

An annual lifting inspection will be carried out by an independent qualified body. Each machine will be inspected before it goes out onto site and a detailed inspection sheet goes into the machine file.

13.0 Environmental Arrangements

Fuel to be stored off site and brought on to site to fill the machines. Once fuelling operations are complete the fuel bowser will be removed. Refuelling of plant to be away from watercourses Spill kits to be kept with the fuel bowser while refuelling machines. Stockpiles of materials should be sealed to prevent run off

14.0 Emergency Procedures

The company adopt a basic site emergency procedure and it is as follows:

- In the case of an accident, injury or near miss Stop work ensure that there is no risk of further injury or accidents contact first aider preserve the scene contact the relevant emergency service, this can be achieved by landline or mobile,
- Raise the alarm and let other members of staff know the emergency.
- Where applicable evacuate the relevant area and if safe to do so ensure the emergency services have clear access and information of the emergency. List casualty numbers, known hazards in the area, missing persons.
- report to supervisor and company management as detailed in the site induction.
- Where possible make a written record of what you saw and hand it in to the company office.

15.0 COSHH Assessments

Oils, Diesel and grease used need only good quality hygiene procedures – using suitable gloves when handling these materials.

Empty grease cartridges to be deposited in the appropriate container. Wash your hands after using and before subsequent break times.

16.0 Risk Assessments

360 Excavator Risk Assessment WL RS 0006