








Safe Work Method Statement

Heating & Gas

Name of Contractor responsible for compliance with SWMS:		Date:				
Company name:	Gasgroup	Workplace location:				
Working at Heights Permit Required?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Confined Space Entry Permit Required?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Personal Protective Equipment (PPE) required to complete the job						
 Gloves <input type="checkbox"/>	 Face mask <input type="checkbox"/>	 Eye protection <input type="checkbox"/>	 Welding mask <input type="checkbox"/>	 Appropriate footwear <input type="checkbox"/>	 Hearing protection <input type="checkbox"/>	 Protective clothing <input type="checkbox"/>
What are the tasks involved? Describe the steps required to perform the task in the sequence they are carried out.		What are the hazards and risks? Against each step list the potential hazards that could cause injury/damage when the task step is performed.		How will hazards and risks be controlled? List the control measure required to eliminate or minimise the risk of injury arising from the identified hazard.		
Planning and Preperation 		Injury to self and others in the area Working Around Asbestos		-Check work area, identify risks, take appropriate action. -Asbestos materials identified and labelled.		

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<p>Installation of equipment and/or maintenance</p>	<p>Falls</p> <p>Back injuries</p> <p>Electric shock</p> <p>Cuts and abrasions</p> <p>Gas Leaks</p> <p>Other injuries</p>	<ul style="list-style-type: none"> -Ensure ladders are in good condition, set up correctly and secured. -Ensure work area is clear -Use suitable trolleys to move equipment. -Minimize continuous bending where possible -When working in ceiling spaces: -Do not stand on fragile areas -Walk along planks or crawl if required. -Electrical leads in good condition -Wear gloves when necessary -Test pipes to ensure no gas leaks -Wear appropriate Personal Protective Equipment

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	Name	Signature	Date
I have provided site specific risk controls to manage the hazards identified above and will comply with the controls listed above.			
I understand the risk controls listed above to be implemented to manage the identified hazards associated with the works to be undertaken.			
Workplace Manager and/or Management OHS Nominee:			