



Grays

300

SAFE WORK METHOD STATEMENT

| SWMS | Responsible Person |    | SMWS Participants |    |    |
|------|--------------------|----|-------------------|----|----|
|      | 1.                 | 4. | 1.                | 4. | 7. |
|      | 2.                 | 5. | 2.                | 5. | 8. |
|      | 3.                 | 6. | 3.                | 6. | 9. |

| Prepared By: |      |           |      | Approved By: |             |           |      |
|--------------|------|-----------|------|--------------|-------------|-----------|------|
|              | Name | Signature | Date |              | GraysOnline | Signature | Date |

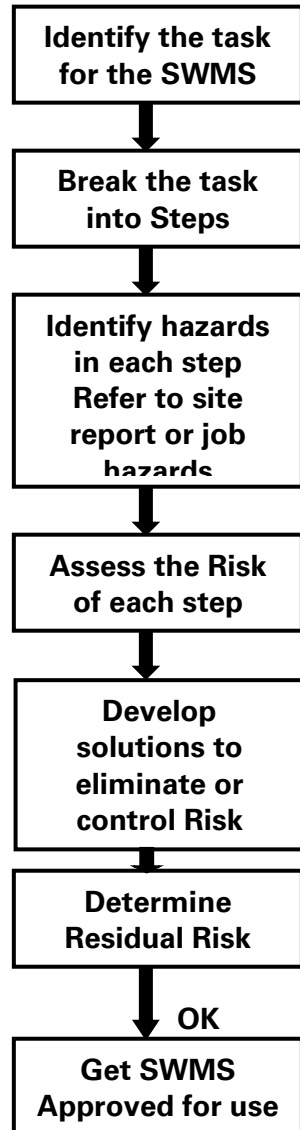
**Job Location and Work to be Performed:**

**Additional information (if required):**



SAFE WORK METHOD STATEMENT

SWMS PROCESS FLOW CHART



TASK REQUIREMENT CHECKLIST

| Grouping                      | System, Tools, Licenses, Equipment Checks, Permits, Insurances |  |
|-------------------------------|--|--|
| Insurances<br>Licenses        |  |  |
| Equipment                     |  |  |
| Personal Protective Equipment |  |  |
| Permits                       |  |  |
| Other relevant Requirements   |  |  |

Instructions for completion of SWMS:

- SWMS to be prepared by Contractor
- SWMS to be reviewed by GraysOnline personnel and amended if required with specific:
  - PPE Requirements
  - Induction Requirements
  - Permits
  - Any other relevant requirements

The identified hazards will be evaluated in accordance with their probability and severity, and classified in the categories indicated below



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| Basic / Job Steps | Potential Accident or Hazard                 | Personnel at Risk | Risk Control Measure                          | Likelihood | Consequence | Responsible for Control Measure Action | Action Done |
|-------------------|--|-------------------|---|------------|-------------|--|-------------|
|                   | Hazard Description and Effect for each Task. |                   | List and describe fully all Controls Required |            |             |  |             |
|                   |  |                   |   |            |             |  |             |
|                   |  |                   |   |            |             |  |             |
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|                   |  |                   |   |            |             |  |             |