



Safe Work Method Statement Template

Centre: _____	Approved by
Prepared By: _____	Name: _____
Date: _____	Signature: _____
Task: _____	Date: _____

Procedure in Steps	Possible Hazards	Risk Score	Safety Controls



Training Required to Complete Activity



Plant/ Equipment Required for this Activity



Maintenance Checks Required for this Activity

Person/s Responsible for Supervising/Inspecting Work:

Print Name

**Position and Qualifications
(relevant to Task)**

Signature

All Workers listed below have read and understood this Safe Work Method Statement and have agreed to abide by the controls listed within it.
