

# HAZARD IDENTIFICATION AND RISK ASSESSMENT FORM

Site/Location: \_\_\_\_\_ Assessment No.: \_\_\_\_\_

## Assessor Details:

Full Name: \_\_\_\_\_

Position/Role: \_\_\_\_\_

Contact Information: \_\_\_\_\_

## Hazard Information:

Hazard Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location of Hazard: \_\_\_\_\_

Potential Consequences: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Risk Assessment:

Likelihood (Choose one): \_\_\_\_\_

Consequence (Choose one): \_\_\_\_\_

Risk Rating (Calculate): \_\_\_\_\_

## Control Measures and Recommendations:

Existing Controls: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Controls Required: \_\_\_\_\_  
\_\_\_\_\_

This Hazard Identification and Risk Assessment Form is completed in accordance with the Work Health and Safety Act 2011 (Cth) and relevant Australian Standards. All information recorded herein is accurate and reflects the current understanding of hazards and risks at the specified site or location. The assessor acknowledges responsibility for ensuring that identified risks are controlled to as low as reasonably practicable (ALARP) and that control measures are implemented and monitored. This document is a legally binding record for the purpose of workplace safety compliance and may be used as evidence of due diligence in legal or regulatory proceedings.

**ASSESSOR'S SIGNATURE**

**REVIEWER'S SIGNATURE**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

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