

Site-Specific Hazard Identification Risk Assessment Form

Site Details

Site Name / Location:

Assessment Date:

Assessor(s) Name:

Description of Work:

Hazard Identification & Risk Assessment

#	Task/Activity	Hazard Identified	Potential Consequences	Risk Rating	Existing Controls	Further Controls Required

Action Plan

#	Action Required	Responsible Person	Target Date	Date Completed

Review and Sign-Off

Reviewed by:

Date:

Comments: