

Business Name:

Business Address:

ABN/NZBN:

## FIRE ALARM SYSTEM INSTALLATION SAFE WORK METHOD STATEMENT (SWMS)





Business Contact:	Phone #:	Principal Contractor (PC):
Responsible person (for monitoring SWMS and work):		PC address:
Signature:	Date:	PC Phone #: <span style="float: right;">Date SWMS provided to PC:</span>
Contact Phone #:		Job Site Address:

### THIS WORK ACTIVITY INVOLVES THE FOLLOWING HAZARDOUS WORK AND ENVIRONMENTAL IMPACTS

- |  |  |  |  |   |
|--|--|--|--|---|
| <input checked="" type="checkbox"/> Electrical equipment | <input type="checkbox"/> Elevated levels                   | <input checked="" type="checkbox"/> Slips, trips and falls | <input checked="" type="checkbox"/> Hazardous substances | <input checked="" type="checkbox"/> Silica dust |
| <input checked="" type="checkbox"/> Hot Work             | <input checked="" type="checkbox"/> Hazardous manual tasks | <input checked="" type="checkbox"/> Outdoor work           | <input type="checkbox"/> Remotely &/or isolated work     | <input type="checkbox"/> ?                      |
| <input type="checkbox"/> Noise and vibration             | <input type="checkbox"/> Native vegetation & weeds         | <input type="checkbox"/> Air quality                       | <input checked="" type="checkbox"/> Waste                | <input type="checkbox"/> Vehicle movement       |
| <input type="checkbox"/> Fuels, oils & chemicals         | <input type="checkbox"/> Terrestrial fauna                 | <input type="checkbox"/> Waterways & soils                 | <input type="checkbox"/> Cultural heritage               | <input type="checkbox"/> ?                      |

### THIS WORK ACTIVITY INVOLVES THE FOLLOWING "HIGH-RISK CONSTRUCTION WORK" (HRCW - IDENTIFIED IN THE JOB TASK COLUMN)

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> Confined spaces  | <input type="checkbox"/> Mobile plant movement | <input type="checkbox"/> Demolition of a load-bearing structure  | <input type="checkbox"/> Asbestos disturbance         |
| <input type="checkbox"/> Using explosives   | <input type="checkbox"/> Diving work           | <input type="checkbox"/> Artificial extremes of temperature  | <input type="checkbox"/> Tilt-up or pre-cast concrete |
| <input checked="" type="checkbox"/> Pressurised gas distribution mains or piping chemical, fuel or refrigerant lines energised electrical installations or services |  |  |   |
| <input type="checkbox"/> Structures or buildings involving structural alterations or repairs that require temporary support to prevent collapse                     |  |  |   |
| <input checked="" type="checkbox"/> Involves a risk of a person falling from 2m or more, including work on telecommunications towers                                |  |  |   |
| <input type="checkbox"/> Working at depths greater than 1.5 Metres, including tunnels or mines  |  | <input checked="" type="checkbox"/> Work in an area that may have a contaminated or flammable atmosphere |   |
| <input type="checkbox"/> Work carried out adjacent to a road, railway or shipping lane, traffic corridor  |  | <input type="checkbox"/> In or near water or other liquid that involves the risk of drowning             |   |

FOOT PROTECTION	HEARING PROTECTION	HIGH VISIBILITY	HEAD PROTECTION	EYE PROTECTION	FACE PROTECTION	HAND PROTECTION	PROTECTIVE CLOTHING	BREATHING PROTECTION	SUN PROTECTION	SAFETY HARNESS	Do not wear rings, watches or jewellery that may become entangled. Long and loose hair must be tied back.
											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

LIKELIHOOD	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC	SCORE	ACTION
ALMOST CERTAIN	3 - HIGH	3 - HIGH	4 - ACUTE	4 - ACUTE	4 - ACUTE		
LIKELY	2 - MODERATE	3 - HIGH	3 - HIGH	4 - ACUTE	4 - ACUTE	4A - ACUTE	DO NOT PROCEED.
POSSIBLE	1 - LOW	2 - MODERATE	3 - HIGH	4 - ACUTE	4 - ACUTE	3H - HIGH	Review before commencing work.
UNLIKELY	1 - LOW	1 - LOW	2 - MODERATE	3 - HIGH	4 - ACUTE	2M - MODERATE	Maintain control measures.
RARE	1 - LOW	1 - LOW	2 - MODERATE	3 - HIGH	3 - HIGH	1L - LOW	Record and monitor.

HIERARCHY OF CONTROLS	MOST EFFECTIVE	Elimination	Substitution	Isolation	Engineering	Administrative	PPE	LEAST EFFECTIVE
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JOB TASK	HAZARDS	RISK	CONTROL MEASURES	RESPONSIBLE PERSON
1. Training	Exposure to respirable crystalline silica (RCS) – dust inhalation	3H	<ul style="list-style-type: none"> <li>Training and Information provided to workers on RCS should include:               <ul style="list-style-type: none"> <li>Identification of RCS dust through Safety Datasheet (SDS) or labels</li> <li>Dust exposure prevention</li> <li>Checking controls are working and using them</li> <li>When and how to use any respiratory protective equipment provided and what to do if something goes wrong (Including worker respirator fit and check processes).</li> </ul> </li> </ul>	Supervisor
	Electrocution	4A	<ul style="list-style-type: none"> <li>All workers who work on or near electrical mains and apparatus must be trained and appropriately qualified with correct licence endorsements for the task               <ul style="list-style-type: none"> <li><b>⚠️ Only licensed electricians to install 240 V hard-wired systems</b></li> </ul> </li> <li>During the previous 12 months (where it is relevant to the work), all workers must have demonstrated competence in:               <ul style="list-style-type: none"> <li>Approved procedures for release, rescue and resuscitation</li> <li>Requirements of the Electrical Safety Rules.</li> </ul> </li> </ul>	
2. Arrival on-site	Personal injury, property damage &/or environmental incident	3H	<ul style="list-style-type: none"> <li>The vehicle should be positioned in a safe location, clear of traffic/vehicles/pedestrians during equipment delivery and materials removal (deploy physical barriers, caution signs as necessary)</li> <li>Do not park illegally</li> <li>Identify and obey all safety-related signage (check site entry requirements)</li> <li>Report to Site Supervisor</li> <li>Ensure site-specific induction undertaken</li> <li>Assess mobile phone reception</li> <li>The worksite is exactly as detailed in Terms of Agreement or contract</li> <li>Complete a JSA specifying the control measures of unanticipated hazards.</li> </ul>	Supervisor to check the site and conduct JSA where necessary
3. Work area set-up	Unauthorised access to the	3H	<ul style="list-style-type: none"> <li>Establish an exclusion zone for other workers and the public. I.e. those not associated with the activity. This zone should be clearly defined by signage and hazard marking tape or flagging</li> </ul>	Supervisors & Workers to

JOB TASK	HAZARDS	RISK	CONTROL MEASURES	RESPONSIBLE PERSON	
16. Emergency response	<ul style="list-style-type: none"> <li>Injury</li> <li>Fatality</li> <li>Environmental damage</li> </ul>	4A	<ul style="list-style-type: none"> <li><b>For police, fire or ambulance call '000.'</b></li> <li>Follow site emergency and evacuation procedures</li> <li>A communication system is available, e.g. a mobile phone or radio</li> <li>Check for dangers to self before helping others</li> <li>Maintain control of the area and stabilise the situation</li> <li>Apply first aid to the injured worker</li> <li>Complete an incident report.</li> </ul>	<ul style="list-style-type: none"> <li>Refer to your SWMS implementing instructions for further specific emergency responses.</li> </ul>	Supervisors and workers ensure controls followed

OVERALL RISK RATING AFTER CONTROLS	<input type="checkbox"/> 1 - Low	<input checked="" type="checkbox"/> 2 - MODERATE	<input type="checkbox"/> 3 - High	<input type="checkbox"/> 4 - ACUTE
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PLANT & EQUIPMENT		HAZARDOUS SUBSTANCES	SUPERVISORY ARRANGEMENTS
<input type="checkbox"/> Electrical tools and leads	Tested and tagged quarterly	<i>List hazardous substances taken on-site and have the SDS on-site.</i> 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.	<input type="checkbox"/> Audits
<input type="checkbox"/> Hand tools - Meet AS/NZS	Regular visual inspection		<input type="checkbox"/> Spot Checks
<input type="checkbox"/> Ladders - Meet AS/NZS	Inspected and tagged out if damaged		<input type="checkbox"/> Reporting systems
<input type="checkbox"/> Mobile plant- <i>specify</i>	Inspected and tagged out if damaged		<input type="checkbox"/> Suitably qualified supervisors for job
<input type="checkbox"/> ?			<input type="checkbox"/> Direct on-site supervision
<input type="checkbox"/> ?			<input type="checkbox"/> Remote site: communication systems/schedule
<input type="checkbox"/> ?			
<input type="checkbox"/> ?			
<input type="checkbox"/> ?			
<input type="checkbox"/> ?			

PERMITS  Not applicable  Hot Work  Confined Space  Local council  ?  ?

SITE MANAGEMENT PLAN Is the work associated with a Construction Project?  Yes  No *If yes – This SWMS must align with requirements of the Site Management Plan in place for the Construction Project.*

**SWMS SIGN-OFF** This SWMS developed in consultation and cooperation with workers and relevant organisation representatives. I have read the above SWMS, and I understand its contents. I confirm that I have the skills and training, including relevant certification, to conduct the task as described. I agree to comply with safety requirements within this SWMS, including risk control measures, safe work instructions, and PPE described.

WORKERS' NAME	JOB ROLE / POSITION E.G. SUPERVISOR, WORKER, TRAINEE	LICENCES, COMPETENCIES & QUALIFICATIONS <i>(add as applicable)</i>			DATE	SIGNATURE
		TYPE / DESCRIPTION	CLASS	NUMBER		
		Construction Card				
		Construction Card				