

Business Name:

Business Address:

ABN/NZBN:

## LOCK OUT TAG OUT (LOTO) 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 checked="" type="checkbox"/> Elevated levels           | <input checked="" type="checkbox"/> Slips, trips and falls | <input checked="" type="checkbox"/> Hazardous substances | <input type="checkbox"/> Silica dust                 |
| <input type="checkbox"/> Hot Work                           | <input checked="" type="checkbox"/> Hazardous manual tasks    | <input type="checkbox"/> Outdoor work                      | <input type="checkbox"/> Remotely &/or isolated work     | <input type="checkbox"/> ?                           |
| <input checked="" type="checkbox"/> Noise and vibration     | <input checked="" type="checkbox"/> Native vegetation & weeds | <input checked="" type="checkbox"/> Air quality            | <input checked="" type="checkbox"/> Waste                | <input checked="" type="checkbox"/> Vehicle movement |
| <input checked="" type="checkbox"/> Fuels, oils & chemicals | <input checked="" type="checkbox"/> Terrestrial fauna         | <input checked="" 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 checked="" 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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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	<b>DO NOT PROCEED.</b>
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.

<b>HIERARCHY OF CONTROLS</b>	<b>MOST EFFECTIVE</b>	Elimination	Substitution	Isolation	Engineering	Administrative	PPE	<b>LEAST EFFECTIVE</b>
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JOB TASK	HAZARDS	RISK	CONTROL MEASURES	RESPONSIBLE PERSON
1. Develop written procedures (SOP) for isolation of specific plant	Potential outcomes for personal injury, property damage &/or environmental incident	3H	<ul style="list-style-type: none"> <li>• Terminology:               <ul style="list-style-type: none"> <li>○ Lockout - A device is placed on, around, or through an energy-isolating device to lock it in a safe position</li> <li>○ Tag out- The process by which an energy-isolating device for an item of plant/equipment is placed in the off position, and a written warning tag is attached. A tag out should be used only when the energy-isolating device is not capable of being locked out, e.g. A small item or power tool</li> <li>○ Lockout-Tag out (LOTO) - A device is placed on, around, or through an energy-isolating device to lock it in a safe position and a written warning tag is attached. Locks and Tags must be substantial enough to prevent casual or accidental removal. Locks and tags must also identify the worker applying and using the device.</li> </ul> </li> <li>• <a href="#">LOCKOUT / TAGOUT PROCEDURE</a></li> <li>• Required isolation points (use manufacturer's diagram - if not available, create a diagram and show all isolation points clearly). Ensure all energy sources isolated:               <ul style="list-style-type: none"> <li>▪ Electrical</li> <li>▪ Fuel</li> <li>▪ Heat / Steam</li> <li>▪ Fluids under pressure</li> <li>▪ Stored energy</li> <li>▪ Radiation</li> </ul> </li> <li>• Identify Types of Locking devices</li> <li>• Identify Types of Tags</li> <li>• Identify the person responsible (including placement of Personal Danger Tags, Out of Service Tags, and authorised removal of another's tags). Identify:               <ul style="list-style-type: none"> <li>○ Plant that requires electrical isolation that must be undertaken by qualified persons</li> </ul> </li> </ul>	Supervisor

JOB TASK	HAZARDS	RISK	CONTROL MEASURES	RESPONSIBLE PERSON
11. HRCW On completion	Unauthorised access	3H	<ul style="list-style-type: none"> <li>If acceptable, remove or add barricades.</li> </ul>	Supervisor to confirm all workers have signed out
	Vehicle/people impact	4A	<ul style="list-style-type: none"> <li>Stay to designated access and egress routes</li> <li>Maintain awareness of surroundings at all times.</li> </ul>	
	Equipment left behind	3H	<ul style="list-style-type: none"> <li>Tools equipment and material removed from the work area</li> <li>All-access/entry points are closed and secure</li> <li>Involve all staff in debrief. Document suggested improvements</li> </ul>	Workers to comply with controls
	Security breach	3H	<ul style="list-style-type: none"> <li>All personnel sign-out on Site Register.</li> </ul>	
12. HRCW 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> <li><b>Refer to your SWMS implementing instructions for further specific emergency responses.</b></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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PERMITS

Not applicable  
  Hot Work  
  Confined Space  
  Local council  
  Isolation  
  ?

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.*

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.	<input type="checkbox"/> Audits <input type="checkbox"/> Spot Checks <input type="checkbox"/> Reporting systems <input type="checkbox"/> Suitably qualified supervisors for job <input type="checkbox"/> Direct on-site supervision <input type="checkbox"/> Remote site: communication systems/schedule
<input type="checkbox"/> Hand tools - Meet AS/NZS	Regular visual inspection		
<input type="checkbox"/> Ladders - Meet AS/NZS	Inspected and tagged out if damaged		
<input type="checkbox"/> Mobile plant- <i>specify</i>	Inspected and tagged out if damaged		
<input type="checkbox"/> ?			