

Core drill

IDENTIFIED HAZARD	RISK (YES / NO)	PROPOSED METHOD OF CONTROL MEASURE	ARE THE CONTROL METHODS PRACTICAL?
Persons could be injured if the operator performs duties that are not his responsibility and beyond the scope of his technical capabilities.	YES	The operator should be adequately trained or licensed. The operator must not carry out any work that is outside his normal duties and report any matters of concern to his supervisor.	YES
Persons could be injured if drill bit jams in hole.	YES	Ensure operator is adequately trained and drill stand is used when cutting holes over 70mm diameter.	YES
Persons could be injured as a result of electrocution.	YES	Ensure the cutting area is clear of electrical cables/wires. Ensure drill is not placed in water or sprayed with water.	YES
Persons could be injured if they come into contact with hot or moving parts.	YES	Keep body parts well away from the bit when in use.	YES
Persons could be injured if they slip, trip or fall whilst using the drill.	YES	Ensure the operator only operates the drill whilst in a firm stable position. Grip the drill firmly with both hands. Do not operate the drill above shoulder height.	YES
Persons could be injured as a result of entanglement of hair, clothing, gloves, necktie, jewellery, cleaning brushes, rags or other materials.	YES	Keep all foreign materials and objects clear of chain during operation. Do not wear loose fitting clothing.	YES
Persons could be injured if the machine operator is unfamiliar with typical unsafe conditions and hazards that could affect the safe operation of the unit.	YES	The operator should be trained in determining unsafe conditions and hazards that are relative to the machine's safe operation.	YES
Persons could be injured if personal protective equipment is not available or being used when working in an unsatisfactory environment.	YES	Instruct the operator to ensure that appropriate personal protective equipment is available and is in good condition prior to commencing work.	YES

MANDATORY PERSONAL PROTECTIVE EQUIPMENT



Customer Signature: _____ Date: _____