

Rubbish chute

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 by crushing or striking from the rubbish chute collapsing during use.	YES	Do not place articles larger than the internal diameter in chute. Do not use the chute if blocked. Barricade the area around the bottom of the chute, to prevent persons from standing near the system. Do not remove weights from a counterweight set up. Take care when extending chute from the vertical axis.	YES
Crushing by the rubbish chute during assembly.	YES	The rubbish chute should be assembled by a trained or competent person. Read and understand the operating instructions. Ensure the rubbish chute system is raised using safe practices.	YES
Persons could be injured if the 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 e.g. noise, heat, fumes, etc.	YES	Instruct the operator to ensure that appropriate personal protective equipment is available and is in good condition prior to commencing work.	YES
Persons could be injured if personal protective equipment is not available or being used when working in an unsatisfactory environment e.g. noise, heat, fumes, etc.	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: _____