

Personnel Questionnaire

Risks / Hazards

Name:
Date:

RUTH + HARDAKER
9.9.14

RISK?

LEVEL of RISK

Does the task involve holding a load away from your body?	2					
Does the task involve reaching upwards?	2					
Does the task involve strenuous pushing or pulling?	2					
Does the task involve moving or carrying a load over a long distance?	2					
Does the task involve excessive or continuous lifting?	2					
Does the task involve stooping to lift or lower the load?	2					
Does the task involve twisting the trunk?	2					
Does the task involve repetitive or prolonged handling?	2					
Does the task involve unusual strength or height?	2					
Does the task involve sudden / unpredictable movements?	2					
Are there others to assist with lifting?	2					
Are packages heavy?	2					
Are packages bulky?	2					
Are packages difficult to hold?	2					
Are packages unstable?	2					
Do packages have contents that are sharp?	2					
Do packages have contents that are awkward in size?	2					
Do packages have contents that are potentially dangerous?	2					
Do packages have contents that are likely to move?	2					
Do packages have Hazardous substances present?	2					

Risks / Hazards

Name: RUTH HAEDEKE
Date: 9.9.14

RISK?

LEVEL of RISK

[illegible]

Personnel Questionnaire Risks / Hazards

Name: **RUTH HAREDAKE**
Date: **9.9.14**

Personal & Personal Working Area	RISK?		LEVEL of RISK			
	Y/N	Yes	No	Low	Medium	High
Is the work area clean and tidy?	Y		✓	✓		
Is there sufficient lighting?	Y		✓	✓		
Is the temperature comfortable?	Y		✓	✓		
Is there adequate heating & ventilation in the working area?	Y		✓	✓		
Is the area around the workstation / workbench clear of any obstructions?	Y		✓	✓		
Are walkways clear of obstructions?	Y		✓	✓		
Are items stacked on shelving properly?	Y		✓	✓		
Is the flooring: slippery, uneven, sloped or have holes?	Y		✓	✓		
Is there any loose or ripped carpeting?	Y		✓	✓		
Are radiators clear of anything combustible?	Y		✓	✓		
Do any cables or wires run across the floor?	Y		✓	✓		
Are all electrical cables in good condition?	Y		✓	✓		
Is there space within and around the workstation / workbench to work?	Y		✓	✓		
Are there any sources of distracting noise?	Y		✓	✓		
Are there any problems with static electricity?	Y		✓	✓		
Is there a Fire extinguisher in the working area?	Y	✓	✓	✓		
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	Y		✓	✓		
Do you know what to do in the event of a fire?	Y		✓	✓		
Are you aware of the fire assembly point?	Y		✓	✓		
Do you know what & where the fire alarm is?	Y		✓	✓		
Is protective clothing and equipment provided?	Y		✓	✓		
Is it effective?	Y		✓	✓		
Do you have a pre-existing medical condition or health problem?	Y		✓	✓		
Are you pregnant?	Y		✓	✓		