

# RISK ASSESSMENT

Title:

**Background:**  
(brief description of task/activity)

**Risk assessment completed by:**  
(list names of all involved in completion of risk assessment)

**Date completed:**

**Date of task/activity:**

**Authorised by:**

Hazard type	Hazard description	Level of risk			Controls	Residual risk			Responsible person	Date implemented by
		Consequence	Likelihood	Risk rating		Consequence	Likelihood	Risk rating		

Please sign below indicating that you have read and understand this risk assessment (all who are to work in accordance with this risk assessment should have read and understood it).

Name	Signature	Date