

RISK ASSESSMENT FORM

WORK PLACE: Highway haunch ASS. BY: Mr L.Man.....
 WORK ACTIVITY: Gully clearing..... JOB TITLE: Lengthsman.....
 DATE: 32/ 14 / 00..... REVIEW DATE: 32/ 14 / 01.....

HAZARD	PEOPLE AFFECTED	SEVERITY	LIKLIHOOD	RISK	CONTROL MEASURE	FURTHER CONTROL
<i>Live Traffic</i>	<i>Lengthsman</i>	<i>Death</i>	<i>Remote</i>	<i>Low</i>	<i>Appropriate Traffic Management Signage</i>	<i>Training in use of Traffic Management Signage by County Council</i>
<i>Slips trips & falls</i>	<i>Lenghtsman</i>	<i>Major</i>	<i>Likely</i>	<i>Medium</i>	<i>Hi-visibility Jacket</i> <i>Non-slip/protective footwear</i>	<i>Ensure Mobile phone available to summon assistance</i>