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| --- | --- |
| Person carrying out risk assessment |  |
| Approved by |  |
| Location |  |
| Activity |  |
| Review date (not more than 1 year after assessment) |  |

Please read the guidelines prior to completing your risk assessment.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Hazards and how they might cause harm | Who might be harmed? | Likelihood of harm | Severity of harm | Risk rating | Control measures | Likelihood of harm with control measures | Severity of harm with control measures  | Risk rating with control measures |
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I certify that the appropriate control measures are in place to ensure that hazards are reduced and that the risks are controlled.

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| Signature of person carrying out risk assessment: |  | Date of assessment: |  |