

Complete on iPhone: tap each small square and type X. Save a copy and send to the main contractor.

## 1. JOB DETAILS

Job / site address

Main contractor

Client / project

Date

Prepared by

Work being completed

## 2. EMERGENCY & SITE CONTACTS

Site contact / phone

Nearest medical centre

Assembly point

First aider

Emergency: 111

## 3. WORK ACTIVITIES - TYPE X IN EACH APPLICABLE BOX

- |  |  |
|--|--|
| <input type="checkbox"/> HVAC installation / replacement   | <input type="checkbox"/> Rainwater goods / spouting            |
| <input type="checkbox"/> Roof or ladder work               | <input type="checkbox"/> Ceiling / roof-space access           |
| <input type="checkbox"/> Electrical isolation / connection | <input type="checkbox"/> Refrigerant handling                  |
| <input type="checkbox"/> Cutting / drilling / grinding     | <input type="checkbox"/> Vehicle / trailer / material delivery |

## 4. PPE - TYPE X IN EACH REQUIRED BOX

- |   |  |
|---|--|
| <input type="checkbox"/> Safety footwear        | <input type="checkbox"/> Hi-vis clothing           |
| <input type="checkbox"/> Safety glasses         | <input type="checkbox"/> Gloves                    |
| <input type="checkbox"/> Hearing protection     | <input type="checkbox"/> Hard hat                  |
| <input type="checkbox"/> Respiratory protection | <input type="checkbox"/> Harness / fall protection |

## 5. SITE CHECK BEFORE STARTING - TYPE X FOR YES

- |  |   |
|--|---|
| <input type="checkbox"/> Site induction completed                      | <input type="checkbox"/> Work area isolated from public / occupants |
| <input type="checkbox"/> Access and housekeeping acceptable            | <input type="checkbox"/> Weather and wind suitable                  |
| <input type="checkbox"/> Services identified before drilling / cutting | <input type="checkbox"/> Tools, ladders and equipment inspected     |

## 6. MAIN HAZARDS AND CONTROLS

<b>Falls from roof / ladder</b>	Use compliant access; secure ladder; maintain 3 points; edge protection or restraint where required.	<input type="checkbox"/>
<b>Electrical energy</b>	Isolate, lock out and verify dead. Electrical work only by authorised persons.	<input type="checkbox"/>
<b>Refrigerant / pressure</b>	Competent handler; leak checks; ventilation; gloves and eye protection.	<input type="checkbox"/>
<b>Sharp sheet metal / spouting</b>	Wear gloves; control cut edges; secure materials; dispose of offcuts.	<input type="checkbox"/>
<b>Manual handling</b>	Use team lift or mechanical aid; plan route; avoid twisting and overreaching.	<input type="checkbox"/>
<b>Dust / asbestos / silica</b>	Check building information; stop if suspect material; use suitable extraction and RPE.	<input type="checkbox"/>
<b>Public / other trades</b>	Barricade work area; coordinate with main contractor; keep access clear.	<input type="checkbox"/>
<b>Weather / wind</b>	Stop roof or long-length spouting work when conditions make control unsafe.	<input type="checkbox"/>

Type X in the right-hand square when the control is in place. Add any extra hazards below.

<b>Additional hazard 1</b>	<b>Control</b>
<input type="text"/>	<input type="text"/>
<b>Additional hazard 2</b>	<b>Control</b>
<input type="text"/>	<input type="text"/>

## 7. AUTHORISATIONS / PERMITS - TYPE X IF REQUIRED AND CONFIRMED

<input type="checkbox"/> Working at height plan	<input type="checkbox"/> Hot-work permit
<input type="checkbox"/> Electrical isolation	<input type="checkbox"/> Asbestos clearance / approval

## 8. WORKER ACKNOWLEDGEMENT

I understand the work, hazards and controls, and will stop work if conditions change or become unsafe.

<b>Worker name</b>	<b>Signature / initials</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Main contractor / site representative acknowledgement (if required)**

<b>Name</b>	<b>Signature / initials</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

## 9. DAILY PRE-START / CHANGE CHECK

Type X: conditions unchanged and controls remain effective

<input type="checkbox"/> YES	<b>Date / time</b>	<b>Changes / new hazards</b>
	<input type="text"/>	<input type="text"/>

**Action taken / controls added**

**Emergency: call 111. Notify the main contractor immediately of incidents, near misses or unsafe changes.**

This SSSP must be reviewed whenever the scope, site, people, weather or hazards change.