



A.B.N. 43 009 438 073

AU07899

OCCUPATIONAL HEALTH & SAFETY PROGRAMME

SAFE WORK METHOD STATEMENT

AUSTRALIAN AIRCONDITIONING

SERVICES PTY. LTD.

42 INDUSTRY STREET
MALAGA WA 6090
TELEPHONE: (08) 9209 2520
FACSIMILE: (08) 9209 2530
Email: aas@aust-aircon.com.au

CONTRACTOR:			NAME: _____
PROJECT:			SIGNED OFF: _____
JOB: REFRIGERANT HANDLING			DATE: _____ JOB NO. _____
PROCEDURE (IN STEPS):			ACCEPTED: YES / NO
POSSIBLE HAZARDS		RISK SCORE	AREA:
Break the job down into steps. Each step should accomplish some major task and be in a logical sequence.	Identify the hazards associated with each step. Examine each to find possibilities that could lead to an accident.	Risk Potential *Class 1, 2 or 3	Specify what action or procedure will be taken to eliminate or minimise the risk of injury or damage. Include what measures will be taken to ensure that the safety control is maintained.
1. Issue Personal Protective Equipment (P.P.E.)	Head, Hand, Foot and Body Injury	2	Refer to Safe Work Instruction: SW 001 Personal Protective Equipment (P.P.E.)
2. Establishment of Site	Manual Handling, Possible Back Strain, Impact Injury	2	Refer to Safe Work Instruction: SW 002 Manual Handling
3. Reclaiming procedures in accordance with the provisions of the clean air act and by an accredited person. Only certified equipment to be used.	Manual Handling, Possible Back Strain, Impact Injury	2	SW 002 Manual Handling. Storage of refrigerants to be in approved containers. Transport in accordance with the Australian "Code of Transport & Dangerous Substances ACT"

* Class 1: Death or Permanent Disability Class 2: Serious Injury/Lost Time Class 3: Minor Injury resulting in no lost time

Form	WMS 6.1	1/3
Rev	A	13-May-11



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Procedure (in steps) continued :	Possible Hazards:	Risk Score	Safety Controls:
Break the job down into steps. Each step should accomplish some major task and be in a logical sequence.	Identify the hazards associated with each step. Examine each to find possibilities that could lead to an accident.	Risk Potential *Class 1, 2 or 3	Specify what action or procedure will be taken to eliminate the risk of injury or damage. Include what measures will be taken to ensure that the safety control is maintained.
4. Charging of systems to be in accordance with the manufacturers specification	Skin-Eye Irritation	1	Refer to Safe Work Instruction: SW 001 Personal Protective Equipment (P.P.E.)
5. Hazard to the individual technicians	Inhalation	2	Wear correct respirator
<p>SPECIAL NOTES: When using or encountering hazardous substances refer to Safe Work Instruction SW 017 Hazardous Substances and Material Safety Data Sheet – Hazardous Substances Register.</p>			

* Class 1: Death or Permanent Disability Class 2: Serious Injury/Lost Time Class 3: Minor Injury resulting in no lost time

Form	WMS 6.2	2/3
Rev	A	13-May-11



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Personal Qualifications & Experience:	Personal Duties & Responsibilities:	Training Required to complete work:
Engineering Details/Certificates/Workplace Services Approvals:	Codes of Practice, Legislation:	
Plant/Equipment:	Maintenance Checks:	
Read & Signed by All Employees on Site:		

Form	WMS 6.3	3/3
Rev	A	13-May-11