



PLANT AND EQUIPMENT HAZARD CHECKLIST

PLANT / EQUIPMENT DETAILS

Project / Site:	Work Activities:	
Plant / Equipment Type:	Maintenance Frequency:	
Operator Certificate / License No.:	Registration / Plant Identification No.:	
Assessed By:	Date:	

'Yes' to any of the following indicates the need to implement appropriate control measures. This checklist should be used in conjunction with the CSCS WHS Risk Management Procedure WHS026

Entanglement	Yes	No	Actions
Can a person's hair, clothing, gloves, necktie, jewelry, cleaning brush or rag or any other items become entangled with moving parts of the plant / equipment?	Y		Example: Further investigation, conduct a Risk Assessment
Crushing - Can anyone be crushed due to:	Yes	No	Actions
Material falling off the plant / equipment?			
Uncontrolled or unexpected movement of the plant / equipment?			
Lack of capacity for the plant / equipment to be slowed, stopped or immobilised?			
The plant / equipment tipping or rolling over?			
Parts of the plant / equipment collapsing?			
Coming into contact with moving parts of the plant / equipment during testing, inspection, operation, maintenance, cleaning or repair?			
Being thrown off or under plant / equipment?			
Being trapped between the plant / equipment and materials or fixed structures?			
Other factors not mentioned?			
Cutting, Stabbing or Puncturing - Can anyone be stabbed or punctured due to: "	Yes	No	Actions
Coming in contact with sharp or flying objects?			
Coming in contact with moving parts during testing, inspection, operation, maintenance, cleaning or repair?			
The plant, parts of the plant or work pieces disintegrating?			



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Work pieces being ejected?			
The mobility of the plant / equipment?			
Uncontrolled or unexpected movement of the plant / equipment?			
Other factors not mentioned?			
Striking - Can anyone be struck by moving objects due to:	Yes	No	Actions
Uncontrolled or unexpected movement of the plant / equipment or material handled by the plant / equipment?			
The plant / equipment, parts of the plant / equipment or work pieces disintegrating?			
Work pieces being ejected?			
Mobility of the plant / equipment?			
Other factors not mentioned?			
High Pressure Fluids	Yes	No	Actions
Can anyone come into contact with fluids under high pressure, due to plant / equipment failure or misuse of the plant / equipment?			
Electrical - Can anyone be injured by electrical shock or burnt due to:	Yes	No	Actions
The plant / equipment contacting live electrical conductors?			
The plant / equipment working in close proximity to electrical conductors?			
Overload of electrical circuits?			
Damaged or poorly maintained electrical leads and cables?			
Damaged electrical switches?			
Water near electrical equipment?			
Lack of isolation procedures?			
Other factors not mentioned? RCD			
Explosion	Yes	No	Actions
Can anyone be injured by explosion of gases, vapors, liquids, dusts or other substances, triggered by the operation of the plant / equipment or by material handled by the plant / equipment?			

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Slipping, Tripping and Falling - Can anyone using or working near the plant / equipment slip, trip or fall due to:	Yes	No	Actions
Uneven or slippery work surfaces?			
Poor housekeeping e.g. offcuts, cables, hoses obstructing walkways, spills not cleaned up? Obstacles being placed in the vicinity of the plant / equipment?			
Heights - Can anyone fall from a height due to:	Yes	No	Actions
Lack of a proper work platform?			
Lack of proper stairs or ladders?			
Lack of guardrails or other suitable edge protection?			
Unprotected holes, penetrations or gaps?			
Poor floor or walking surfaces, such as the lack of a slip- resistant surface?			
Steep walking surfaces?			
Collapse of the supporting structure? \Box			
Other factors not mentioned?			
Ergonomics - Can anyone be injured due to:	Yes	No	Actions
Ergonomics - Can anyone be injured due to: Poorly designed seating?	Yes	No	Actions
	Yes	No	Actions
Poorly designed seating?	Yes	No	Actions
Poorly designed seating? Poorly designed operator controls?	Yes	No	Actions
Poorly designed seating? Poorly designed operator controls? High forces?	Yes	No	Actions
Poorly designed seating? Poorly designed operator controls? High forces? Repetitive movements?	Yes	No	Actions
Poorly designed seating? Poorly designed operator controls? High forces? Repetitive movements? Awkward body posture or the need for excessive effort?	Yes	No	Actions
Poorly designed seating? Poorly designed operator controls? High forces? Repetitive movements? Awkward body posture or the need for excessive effort? Vibration?	Yes	No	Actions
Poorly designed seating? Poorly designed operator controls? High forces? Repetitive movements? Awkward body posture or the need for excessive effort? Vibration? Other factors not mentioned? Combination of Hazards - Can anyone be injured due to unexpected start-up, unexpected over-run/over-speed (or			
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Plant and Equipment Hazard Checklist Date of first issue: 01-10-2014

WHS.092 V003 Date of last review: 11-09-2019 Page 3 of 4 Suggested date of next review: 11-09-2022

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Other environmental factors (gravity, wind, etc.)?			
Errors in the software?			
Errors made by the operator?			
Other hazards - Can anyone be injured due to:	Yes	No	Actions
Noise?			
Inadequate or poorly placed lighting?			
Entry into any confined spaces of the plant / equipment?			
Failure to select plant that is suitable for its intended use?			
Contact with hot or cold parts of plant / equipment?			
Exposure to hazardous chemicals, radiation or other emissions released by the plant / equipment?			
Lack of operator competency?			
Does the plant / equipment have an operator's manual and log books?			
Has the plant / equipment been maintained in accordance with the manufactures recommendations and is there a maintenance record available?			
Is all the necessary PPE and information provided with the plant / equipment?			
Does the plant / equipment require a specific certificate, license or other form of competency to use, erect or install?			
Is the plant / equipment registered with the relevant authority?			
Have the chains for use with the plant / equipment been tested and tagged?			
Will the plant / equipment be safely stowed, locked up or safeguarded after hours or when not in use?			
Has a risk assessment been carried out for identified hazards associated with the use of plant / equipment on site?			
Other factors not mentioned?			

Company Representative Name: _____

Company Representative Signature: _____ Date: _____