

Hazardous Chemical:	Firesound Grey – HB Fuller		
How Used:	Manually Applied using an applicator – Water Based Product		
Location (Used):	Throughout Site	Used By:	07/05/2026
Frequency / duration of use:	Monthly	Quantities used:	
Nature of Hazard:	<input type="checkbox"/> Toxic	<input type="checkbox"/> Sensitiser (allergic- type skin or respiratory reaction)	
	<input type="checkbox"/> Corrosive	<input type="checkbox"/> Carcinogenic (cancer)	
	<input type="checkbox"/> Harmful	<input type="checkbox"/> Mutagenic (mutations/ genetic change)	
	<input type="checkbox"/> Irritant	<input type="checkbox"/> Teratogenic (birth defects)	
	<input type="checkbox"/> Other hazard/s (specify):		

Monitoring				Could cause injury to/or via:			
Health surveillance is required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		<input type="checkbox"/> Eyes	<input type="checkbox"/> Skin		
Air monitoring program required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		<input type="checkbox"/> Inhalation	<input type="checkbox"/> Ingestion		
				<input type="checkbox"/> Injection	<input type="checkbox"/> Swallowing		

What Control Measures Are in Place or Proposed	Present	Recommended
Isolation	<input type="checkbox"/>	<input type="checkbox"/>
Fume cupboard	<input type="checkbox"/>	<input type="checkbox"/>
General ventilation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Natural ventilation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other engineering controls	<input type="checkbox"/>	<input type="checkbox"/>
Safe work methods (e.g., pumping instead of pouring)	<input type="checkbox"/>	<input type="checkbox"/>
Reduce quantity and/or concentration	<input type="checkbox"/>	<input type="checkbox"/>
Information (at least SDS and label)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ongoing training (hazards, safe use, PPE, health surveillance if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Personal protective equipment (list): <ul style="list-style-type: none"> - Safety gloves (i.e., Nitrile) - Safety glasses with side-shields/Chemical goggles 	<input type="checkbox"/>	<input checked="" type="checkbox"/>
In case of insufficient ventilation; <ul style="list-style-type: none"> - Respirator (see SDS, section 8) 		
First aid supplies/equipment (e.g., safety shower)	<input type="checkbox"/>	<input type="checkbox"/>
First aid training	<input type="checkbox"/>	<input type="checkbox"/>
Evacuation plan, emergency plan and equipment required.	<input type="checkbox"/>	<input type="checkbox"/>
Other controls (specify)	<input type="checkbox"/>	<input type="checkbox"/>

Outcomes	Action required to reduce risks:
<input checked="" type="checkbox"/> Risks not significant now and not likely to increase	check adequacy of controls and whether any exposure routes are at risk)
<input type="checkbox"/> Risks significant but effectively controlled at the moment	<input type="checkbox"/> No <input type="checkbox"/> Yes (specify):
<input type="checkbox"/> Risks significant and not adequately controlled at the moment	
<input type="checkbox"/> Uncertain about risks; more detailed assessment required	

Carried Out By:			
Print Name:	Robert Anderson	Signature:	 Date: 23/01/2025
Approved By:			
Print Name:	Robert Anderson	Signature:	 Date: 23/01/2025

Likelihood	Criteria
Rare - 1	The event may occur only in exceptional circumstances
Unlikely - 2	Could occur at some time / the event is not expected to occur
Moderate - 3	The event may occur
Likely - 4	Likely to occur at some time / the event will probably occur
Almost Certain - 5	Has or likely to occur weekly.

Consequence	Safety	Environment
Insignificant - 1	No medical treatment other than first aid required and no lost time injury.	No lasting detrimental effect on the environment. Insignificant damage less than \$1000
Minor - 2	Medically treated injury.	Short term, local detrimental effect on the environment or social impact. Plant, property, or equipment damage less than \$10,000 and no disruption to business
Moderate - 3	Lost time injury without being admitted to a hospital.	Serious environmental event (discharge of pollution) requires remedial action. Breach of environmental law. No long-term impact on environment. Plant, property, or equipment damage less than \$100,000 and minimal disruption to business
Major - 4	Lost time injury resulting in being admitted to hospital with the ability to return to work after treatments.	Any of the above, with the potential for long-term environmental or social impact. Plant, property, or equipment damage less than \$1,000,000, major disruption to business
Extreme - 5	Fatality, permanent disability or multiple serious injuries to staff, contractors or public.	Extensive and long-term impacts on the environment and community. Plant, property, or equipment damage more than \$1,000,000, major disruption to business i.e., sites shut down

		Consequence				
		1 Insign.	2 Minor	3 Mod.	4 Major	5 Extreme
Likelihood	1 Rare	1	2	3	4	5
	2 Unlikely	2	4	6	8	10
	3 Moderate	3	6	9	12	15
	4 Likely	4	8	12	16	20
	5 Almost certain	5	10	15	20	25

Risk Levels			
Low (1-3)	Medium (4 – 8)	High (9 – 14)	Extreme (15 – 20)
Works shall be monitored by supervisor. Any risk assessed as presenting a low risk level will be permitted to be controlled using a combination of controls as appropriate, more than one lower-level control must be applied if elimination and or engineering controls are not practicable	Works shall be monitored by senior management. Any risk assessed as presenting high or medium risk level will only be allowed to be controlled using a combination of at least one engineering control and one lower-level controls as appropriate	No works to commence unless otherwise approved by Senior Management. Any risk assessed as presenting high or medium risk level will only be allowed to be controlled using a combination of at least one engineering control and one lower-level controls as appropriate	No works to commence unless otherwise authorised by the Director. Any risk assessed presenting extreme risk level will only be allowed to be controlled using elimination and or engineering controls as the primary source of controls. The activity MUST be signed off by director or project manager before proceeding

Hierarchy of Controls

Eliminate	Can we eliminate or remove the hazard completely?
Substitute	Can we substitute the hazard with something else less dangerous?
Engineer / Isolation	Can we re-design or isolate the hazard completely?
Administration	What controls can we put in place, e.g., training, job rotation, supervision?
PPE	What personal protective equipment is required to undertake this activity?