



Workplace Name:			
Service Provider [contractor or supplier]:			
Date of Review:		Scope of work:	
Reviewed by [name]:		Signature:	
PART B: JSEA REVIEW		Further Action / Comments	
a) Name and registered office, ABN/ACN and contact details of the company that shall undertake the work		Yes <input type="checkbox"/> No <input type="checkbox"/>	
b) Signed/dated by management/workplace representative supervising the work		Yes <input type="checkbox"/> No <input type="checkbox"/>	
c) Description of specific work tasks and how they are to be carried out		Yes <input type="checkbox"/> No <input type="checkbox"/>	
d) Work activities assessed as having significant health and safety hazards and environment impacts		Yes <input type="checkbox"/> No <input type="checkbox"/>	
e) Identify HSE hazards/impacts relevant to all work activities including those identified in the Mirvac R & O register		Yes <input type="checkbox"/> No <input type="checkbox"/>	
f) Identify the site-specific environment impacts relevant to all work activities  <input type="checkbox"/> <b>Waste</b> – bulk, prescribed/hazardous, license to discharge, concrete, paint or other washout?  <input type="checkbox"/> <b>Air quality</b> – dust, emissions, odours or stockpiles?  <input type="checkbox"/> <b>Noise</b> – location of nearest sensitive receiver & noise levels –vs–background levels?  <input type="checkbox"/> <b>Water quality</b> – slurry, nearby drain inlets, sediment laden run off, quality of any discharge, e.g. pH, solids, turbidity?  <input type="checkbox"/> <b>Flora &amp; Fauna</b> – protected species /habitats on/adjacent to the site?  <input type="checkbox"/> <b>Soil</b> – chemical storage, refueling, oil or hydraulic fluid leakage, acid sulphates?  <b>Vehicle movement:</b> site access, mud and rumble grid/wheel wash.		Yes <input type="checkbox"/> No <input type="checkbox"/>	
g) Control measures that shall be applied to the identified hazards/ impacts including <u>Critical Controls &amp; Activities</u> identified in the Mirvac R & O register		Yes <input type="checkbox"/> No <input type="checkbox"/>	





<b>h) List person(s) responsible</b> for ensuring each of the control measures are implemented	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Plant &amp; equipment</b> to be used in the work and controls reflect OEM, Plant Risk Assessment, ROPs, FOPs and other requirements		
<b>j) Products/hazardous substances</b> to be used in the work and records provided	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>k) Legislation, standards or codes of practice</b> references (where required by legislation) relevant to the work including those identified in the Mirvac R & O register	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>l) Controls compliant</b> with identified Legislation, standards, codes of practice, Mirvac Minimum Requirements and Hierarchy of Controls.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>m) Qualifications of the personnel</b> that shall undertake the work including those identified in the Mirvac R & O register	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>n) Training or permits</b> required for the work including those identified in the Mirvac R & O register	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>o) Record of induction</b> for employees/contractors into the JSEA or equivalent risk assessment.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>p) Other issues</b>		
<b>Review outcome</b>		
JSEA accepted no amendment		
JSEA accepted minor amendment		
JSEA rejected major amendment		
<b>Corrective action required</b>		
I confirm that I have assessed the adequacy of all documentation including the Plant Risk Assessment and Hazardous Chemicals/Substances Risk Assessment		
<b>Reviewed by:</b>		
Name	Signature	Date
<b>Workplace Manager</b>		
Name	Signature	Date
Copy to Service Provider (if applicable)	Date	

