




# Risk Assessment

Risk assessment number:	Date of risk assessment:
Task / area / activity assessed:	Assessment completed by:

LIKELIHOOD					CONSEQUENCE (Worst Case)					RISK RATING (Likelihood x Consequence)		
5	4	3	2	1	5	4	3	2	1	HIGH	MEDIUM	LOW
Extremely Likely	Very Likely	Likely	Unlikely	Very Unlikely	Fatality	Severe Injury	Lost Time Injury	Minor Injury	No Injury			

Risk Number	Person Affected by Hazard	Identified Hazard	Existing Controls	Likelihood Rating	Consequence Rating	Risk Rating	Action Required? Yes or No

Risk Number	Person Affected by Hazard	Identified Hazard	Existing Controls	Likelihood Rating	Consequence Rating	Risk Rating	Action Required? Yes or No

Further actions required to control risks			Control responsibility	
Risk Number	Action Required	Person to Action	Target Date	Completed Date

