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| **RISK ASSESSMENT**  Please read guidelines prior to completing your Risk Assessment | | | | | |
| **Building/Area/Activity being assessed:** | | | | **Risk Assessment complete by:**  **Job Title:**  **Date of assessment: Date for review:** | |
| **TASK or ACTIVITY** | **HAZARD** | **WHO MIGHT BE HARMED** | **RISK LEVEL**  (Low/Med/High) | **CONTROL MEASURES CURRENTLY IN PLACE OR REQUIRED**  (Add any other control measures/actions you feel are required) | **NEW RISK LEVEL**  (Low/Med/High) |
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