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| **Creator/Reviewer of Risk Assessment** | **Name** |
| **Signature** |
| **Date** |  |

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| **Severity** | **Likelihood** | **Risk Rating\* (S x L)** |
| 1 No or Little Harm | 1 Unlikely | 1-5 Low |
| 2 Minor/First Aid | 2 Possible | 6-10 Medium |
| 3 Medical Attention | 3 Probable | 10+ high |
| 4 Hospitalisation | 4 Likely |  |
| 5 Death/Irreparable Injury | 5 Certain |  |

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| Activity/Item Being Assessed | Hazard Identified | Persons/Property At Risk | Control Measures | Severity | Likelihood | Risk Rating\* | Notes/Safety Advice |
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