

MCC NUMBER

RAD _____

Minimum Control Checklist – Radiation Hazard (RADHAZ) Works

PART 1 – Minimum Controls Checklist details – Available on BSAFE

Work Order/Project #	
Name	
Contact Number	
Company	
Date & Time	

Minimum Controls Checklist (Open)

Location of Work	
Description of Work	
Person in control of the work	
Confirm the following is in place:	<input type="checkbox"/> Site specific SWMS in place and reviewed in consultation with work group <input type="checkbox"/> Work area cordoned off or barricaded/ warning signs in place <input type="checkbox"/> Emergency exits / muster points / contingency plans understood <input type="checkbox"/> All workers have current licenses/certificates of competency for the works
RADHAZ emitters and dangerous voltages associated with the proposed task have been Locked/Tagged out?	
Isolation controls will only be removed by the RADHAZ isolator or under their express direction?*	
Isolation register completed (where required on site)?*	
BGIS has been notified of works occurring	Yes List BGIS representative notified: _____
Please detail any other controls in place:	
Name:	
Signature	
Date	