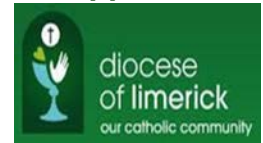


Hazard Assessment Form

(NBSCCCI 1.8A T1)



Name of group _____

Date of hazard assessment _____

Person completing the hazard assessment _____

Hazard	Who is at risk?	Likelihood of harm	Consequences	Controls needed