

Plumbing Risk Assessment

Job Address:	Technician Name:
Date:	Job Description:
Visual Inspection	Task 3: Pipe Repair/Replacement
General condition of the site and immed	liate hazards: Water damage
Safe access to the work area	Exposure to sewage or contaminants
Signs of structural damage	Use of power tools
Evidence of previous plumbing repairs	Risk Level: (Low/Medium/High)
	Control Measures:
Client Consultation	Task 4: Drain Cleaning
Discuss known issues or concerns:	
History of plumbing problems	Chemical exposure (if using drain cleaners)
Presence of outdated or non-standard plumbing	materials Biological hazards from blockages
Any DIY repairs or modifications	Equipment entanglement
	Risk Level: (Low/Medium/High)
Hazard Identification	Control Measures:
Task 1: Site Preparation	
Electrical risks (e.g., working near live wires)	Personal Protective Equipment
Trip hazards	Required PPE:
Exposure to hazardous materials (e.g., asbestos, m	nold) Safety glasses
Risk Level: (Low/Medium/High)	Gloves
Control Measures:	Ear protection (if using loud equipment)
	Dust mask/respirator (if exposed to hazardous materials)
Task 2: Water Heater Maintenance	Other:
Burns from hot surfaces or steam	
Gas leaks (if gas-powered)	Emergency Procedures
Electrical shock (if electric-powered)	First Aid Kit: Confirm availability and location
—	Emergency Contacts List.
Risk Level: (Low/Medium/High)	Evacuation Plan: Identify nearest exits and assembly points
Control Measures:	



All hazards identified and control measures in place PPE and safety equipment ready Client informed of the work process and potential risks Emergency procedures reviewed with the team Technician Signature: Date:	Final Checklist		
Client informed of the work process and potential risks Emergency procedures reviewed with the team Technician Signature: Client Signature:	All hazards identified and control measures in place		
Emergency procedures reviewed with the team Technician Signature: Client Signature:	PPE and safety equipment ready		
Technician Signature: Client Signature:	Client informed of the work process and potential risks		
Technician Signature: Client Signature:	Emergency procedures reviewed with the team		
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Date:	Technician Signature:	Client Signature:	
Date: Date:			
	Date:	Date:	