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| --- | --- |
| *Likelihood* | ***Consequence***Risk Matrix |
|  | InsignificantNo treatment/ in-house first aid | MinorMedical Treatment | ModerateSignificant non-permanent injury | MajorExtensive permanent injury | CatastrophicDeath permanent disabling injury |
| Almost certain to occur in most circumstances | High | High | Extreme | Extreme | Extreme |
| Likely to occur frequently | Medium | High | High | Extreme | Extreme |
| Likely to occur at some time | Low | Medium | High | Extreme | Extreme |
| Unlikely to occur, but could happen | Low | Low | Medium | High | Extreme |
| May occur, but probably never will | Low | Low | Medium | High | High |

**HAZARD REGISTER**

**WORKSITE**

**LOCATION/AREA**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Issue No. | Source ofHazard/Issue | Date | Reference No.R/A or Hazard Report | HAZARD / ISSUE | RiskRatingbefore controls actioned(EHML) | ACTIONS | RiskRatingafter controls actioned(EHML) | Person/sResponsible | DateCompleted | Sign Off |
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