

## Safe Work Method Statement

### Combined Services - plumbing and electrical minor works

|                         |                                                                                                                              |                                   |                                         |
|-------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------|
| <b>PCBU:</b>            | Robertson's Remedial and Painting Pty Ltd 10/56 Buffalo Road, Gladesville NSW 2111 Phone: (02) 9181 3519 ABN: 16 140 746 247 | <b>Site address:</b>              | [Insert Site Address Here]              |
| <b>Project Manager:</b> | ■ [Insert Project Manager Name Here]                                                                                         | <b>Date SWMS provided to PC:</b>  | 19-Mar-26                               |
| <b>Work activity:</b>   | Combined Services - plumbing and electrical minor works                                                                      | <b>Principal Contractor (PC):</b> | [Insert Principal Contractor (PC) Here] |

High Risk Construction Work (HRCW): ☐ Risk of a person falling more than 2 metres ☐ Likely to involve disturbing asbestos ☐ Work in or near a shaft or trench deeper than 1.5 m or a tunnel ☐ Work on or near chemical, fuel or refrigerant lines ☐ Tilt-up or precast concrete elements ☐ Work on a telecommunication tower ☐ Temporary load-bearing support for structural alterations or repairs ☐ Use of explosives ☒ **Work on or near energised electrical installations or services** ☐ Work on, in or adjacent to a road, railway, shipping lane or other traffic corridor in use by traffic other than pedestrians ☐ Demolition of load-bearing structure ☐ Work in or near a confined space ☐ Work on or near pressurised gas mains or piping ☐ Work in an area that may have a contaminated or flammable atmosphere ☐ Work in an area with movement of powered mobile plant ☐ Work in areas with artificial extremes of temperature ☐ Work in or near water or other liquid that involves a risk of drowning ☐ Diving work

|                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                        |           |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------|
| <b>Person responsible for ensuring compliance with SWMS:</b>          | ■ [Insert Supervisor Name Here]                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Date SWMS received:</b>             | 19-Mar-26 |
| <b>What measures are in place to ensure compliance with the SWMS?</b> | Toolbox meetings, SWMS sign off, job observations and supervision review. If issues with the SWMS or new hazards are identified, the supervisor must be notified. When changes are made to SWMS, it will be communicated to all workers.                                                                                                                                                                                                                    |                                        |           |
| <b>Person responsible for reviewing SWMS control measures:</b>        | ■ [Insert Project Manager Name Here]                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>Date SWMS received by reviewer:</b> | 19-Mar-26 |
| <b>How will the SWMS control measures be reviewed?</b>                | The control measures implemented will be reviewed and if necessary, revised annually or if work methods change, the control measures are not effective in controlling the risk, a new hazard/risk is identified or following an incident. The SWMS will be reviewed in consultation with workers and/or others who may be affected by the SWMS. Any changes to the SWMS will be communicated with workers at induction, daily pre-starts and toolbox talks. |                                        |           |
| <b>Reviewer's signature:</b>                                          | ■ [Insert Project Manager Name Here]                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>Review date:</b>                    | 19-Mar-26 |

This SWMS must be kept and be available for inspection until the high-risk construction work to which this SWMS relates is completed. If the SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to the high-risk construction work in this SWMS, the SWMS must be kept for at least 2 years from the date of the notifiable incident.

# Safe Work Method Statement PRE-REQUISITES TABLE

| Must be in place before starting work |                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                      |                                                                                                                                                                                                                                                                                                                                                                                                          |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PPE — All Persons on Site             | <ul style="list-style-type: none"> <li>Steel-capped safety boots (AS/NZS 2210)</li> <li>Hi-vis vest or long sleeves</li> <li>Safety glasses (AS/NZS 1337.1)</li> <li>Safety gloves — task-appropriate (nitrile for plumbing; insulated for electrical)</li> </ul>                                                                                                                                                                               | Additional PPE       |                                                                                                                                                                                                                                                                                                                                                                                                          |
| Licences / Qualifications             | <ul style="list-style-type: none"> <li>White Card (all workers)</li> <li>Electrical Contractor Licence / Electrical Worker Licence (Class A or appropriate) — electrical workers</li> <li>Plumber and Drainer Licence — plumbing workers</li> <li>Working at Heights training — if ladder or overhead access is involved</li> </ul>                                                                                                             | Permits & Approvals  | <ul style="list-style-type: none"> <li>Electrical works notification to NSW Fair Trading (where required before commencement)</li> <li>Certificate of Compliance — Electrical Work (CCEW) — issued on completion</li> <li>Plumbing and drainage compliance certificate on completion (where required by local authority)</li> <li>[Insert any site-specific permits or access approvals here]</li> </ul> |
| Plant & Equipment                     | <ul style="list-style-type: none"> <li>Approved voltage tester / non-contact voltage tester (AS/NZS 61010)</li> <li>LOTO (lockout/tagout) devices and personalised tags</li> <li>Power tools — test-tagged per AS/NZS 3760 with current tags</li> <li>RCD on all portable electrical equipment</li> <li>Pipe pressure test or function test equipment (where required)</li> <li>Standard hand tools for plumbing and electrical work</li> </ul> | Hazardous Substances | <ul style="list-style-type: none"> <li>Pipe sealants, flux, and thread compounds — SDS accessible on site for any product used</li> <li>Workers briefed on product hazards and first aid before first use</li> </ul>                                                                                                                                                                                     |
| Consultation                          | Workers consulted in preparation of this SWMS per NSW WHS Regulation r.299(3) and r.300(2). SWMS reviewed with all workers before work commences — workers sign off before starting.                                                                                                                                                                                                                                                            | Legislative Basis    | Work Health and Safety Act 2011 (NSW)   WHS Regulation 2017 (NSW) rr.291–302   Code of Practice: Managing Electrical Risks in the Workplace   Plumbing Code of Australia   AS/NZS 3000 Wiring Rules (2018)   AS/NZS 3760 In-Service Safety Inspection and Testing of Electrical Equipment   Electricity (Consumer Safety) Act 2004 (NSW)                                                                 |

## Safe Work Method Statement

**Brief Description:** Combined SWMS for plumbing and electrical minor works on residential and commercial premises. Covers site setup and service identification, plumbing minor works (isolation, repair and installation, and reinstatement), electrical minor works (isolation, wiring and connections, and reinstatement), and testing and handover. Applicable HRCW: work involving or near energised electrical installations.

### STEP-BY-STEP SAFE WORK METHOD TABLE

|   | Task                                                     | Hazard                                                                                                                                                                                                                                                                                              | Risk (Pre)        | Controls                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Risk (Post)    | Responsibility                                                                                                                                                                                             | CCVS Code                                                                                                                                                                                                                                                                                                                                                                  |
|---|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | <b>Site setup, service identification, and pre-start</b> | <ul style="list-style-type: none"> <li>Unidentified services — unplanned contact with live or pressurised line</li> <li>Workers not briefed — hazards and controls not understood before work starts</li> <li>Unsecured work area — occupants or public enter and are exposed to hazards</li> </ul> | <b>Medium (2)</b> | <b>Admin:</b> <ul style="list-style-type: none"> <li>Identify all services (electrical, water) affected by the work before commencing — mark or tag each isolation point</li> <li>Brief all workers on scope, hazards, controls, and emergency procedures before starting</li> <li>Secure work area — restrict access by occupants or public for duration of works</li> <li>Confirm for all workers before starting: White Card, required trade licence, SWMS signed</li> </ul> | <b>Low (1)</b> | <ul style="list-style-type: none"> <li>SUP — identify services, tag isolation points, brief workers, secure area</li> <li>WKR — confirm briefed, SWMS signed, area secured before starting work</li> </ul> | <b>HOLD POINT 1</b><br>1. Work area and all affected services identified before work commences<br><br><b>STOP-WORK TRIGGER</b> <ul style="list-style-type: none"> <li>Service location cannot be confirmed</li> <li>Unexpected or unidentified service encountered</li> <li>Work area cannot be secured from occupant or public access</li> </ul> <b>RISK CODE: SYS-M2</b> |

## Safe Work Method Statement

|   | Task                      | Hazard                                                                                                                                                                                                                 | Risk (Pre)      | Controls                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Risk (Post)    | Responsibility                                                                                                                                                                                                             | CCVS Code                                                                                                                                                                                                                                                |
|---|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2 | <b>Emergency response</b> | <ul style="list-style-type: none"> <li>Medical emergency on site</li> <li>Fire or chemical spill</li> <li>Worker incapacitated at height — scaffold, EWP, rope access</li> <li>Building evacuation required</li> </ul> | <b>High (3)</b> | <b>Admin:</b> <ul style="list-style-type: none"> <li>Site Emergency Plan communicated at induction and toolbox talk after being updated — emergency contacts displayed at site entry — call 000 for any serious injury or emergency — supervisor directs responders (site address available)</li> <li>Assembly Point identified and communicated at induction</li> <li>WAH Rescue Plan documented and practised — rescue equipment on site (rope rescue kit for rope access, EWP rescue procedure)</li> </ul> <p><b>Incident reporting: incidents, injuries, near-misses, and hazards notified to PM's WhatsApp work group — notifiable incidents reported to SafeWork NSW per WHS Act s.38</b></p> | <b>Low (1)</b> | <ul style="list-style-type: none"> <li>SUP — confirm emergency plan posted, rescue equipment on site, assembly point established</li> <li>WKR — confirm emergency contacts and assembly point at each induction</li> </ul> | <b>STOP-WORK TRIGGER</b> <ul style="list-style-type: none"> <li>Any emergency — all work ceases until area declared safe by supervisor</li> <li>No restart without toolbox talk on incident and any changed controls</li> </ul> <b>RISK CODE: SYS-H3</b> |

## Safe Work Method Statement

|   | Task                                                             | Hazard                                                                                                                                                                                                                                                                                                                                  | Risk (Pre)        | Controls                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Risk (Post)    | Responsibility                                                                                                                                                                          | CCVS Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3 | <b>Plumbing minor works — isolation, work, and reinstatement</b> | <ul style="list-style-type: none"> <li>Uncontrolled water release — flood damage or slip hazard</li> <li>Contaminated water — exposure to wastewater or stagnant water</li> <li>Concealed connections — incorrect reinstatement creating latent leaks</li> <li>Awkward access — manual handling in ceiling or subfloor space</li> </ul> | <b>Medium (2)</b> | <p><b>Isolation:</b></p> <ul style="list-style-type: none"> <li>Isolate water supply at nearest valve before cutting, disconnecting, or modifying any pipe</li> </ul> <p><b>Engineering:</b></p> <ul style="list-style-type: none"> <li>Confirm water pressure is relieved before cutting or disconnecting — have drip tray or rags in place</li> </ul> <p><b>Admin:</b></p> <ul style="list-style-type: none"> <li>Inspect concealed connections before close-up — photograph altered or new connections</li> <li>Confirm pipe material and type before selecting fittings or sealants</li> <li>Contaminated water — wear nitrile gloves</li> <li>Ceiling or subfloor access — confirm space is safe before entry (ventilation, structural stability, headroom)</li> </ul> | <b>Low (1)</b> | <ul style="list-style-type: none"> <li>LIC PLB — isolate, complete works, inspect before close-up</li> <li>SUP — confirm isolation tagged, inspection done, leak test passed</li> </ul> | <p><b>HOLD POINT 2</b></p> <ol style="list-style-type: none"> <li>Isolation confirmed and tagged before cutting or disconnecting</li> <li>Concealed connections inspected and photographed before close-up</li> <li>Leak test completed and passed before return to service</li> </ol> <p><b>STOP-WORK TRIGGER</b></p> <ul style="list-style-type: none"> <li>Unable to positively isolate water supply</li> <li>Uncontrolled water release cannot be stopped</li> <li>Ceiling, subfloor, or access space is unsafe to enter</li> <li>Suspected asbestos or hazardous material identified</li> </ul> <p><b>RISK CODE: PLB-M2</b></p> |

## Safe Work Method Statement

|   | Task                                                               | Hazard                                                                                                                                                                                                                                                                                                                           | Risk (Pre)      | Controls                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Risk (Post)    | Responsibility                                                                                                                                                                                                     | CCVS Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|---|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4 | <b>Electrical minor works — isolation, work, and reinstatement</b> | <ul style="list-style-type: none"> <li>• Contact with live parts — electrocution or electric shock</li> <li>• Inadequate isolation — circuit re-energised during work</li> <li>• Damaged wiring or insulation — latent shock or fire risk</li> <li>• Concealed services — unintended contact when drilling or cutting</li> </ul> | <b>High (3)</b> | <p><b>Isolation:</b></p> <ul style="list-style-type: none"> <li>• Isolate circuit at switchboard — lock out and apply personal tag before work commences</li> <li>• Verify isolation with approved voltage tester before touching any conductors</li> </ul> <p><b>Engineering:</b></p> <ul style="list-style-type: none"> <li>• Confirm absence of voltage at work point with approved non-contact or contact tester</li> <li>• Use insulated tools rated for electrical work throughout</li> </ul> <p><b>Admin:</b></p> <ul style="list-style-type: none"> <li>• Confirm service location before drilling, cutting, or penetrating any surface</li> <li>• Inspect all wiring and connections before reinstating covers or closing up</li> <li>• Licensed electrical workers only to connect, disconnect, or alter wiring</li> <li>• All work to comply with AS/NZS 3000 Wiring Rules</li> </ul> | <b>Low (1)</b> | <ul style="list-style-type: none"> <li>• LIC ELEC — isolate, verify absence of voltage, complete works, inspect</li> <li>• SUP — confirm LOTO fitted, tester used, inspection completed before close-up</li> </ul> | <p><b>HOLD POINT 3</b></p> <ol style="list-style-type: none"> <li>1. Circuit isolated by LOTO before work commences</li> <li>2. Absence of voltage verified with approved tester at work point</li> <li>3. All connections inspected before reinstatement or energisation</li> </ol> <p><b>STOP-WORK TRIGGER</b></p> <ul style="list-style-type: none"> <li>• Positive isolation cannot be confirmed</li> <li>• Voltage detected at work point after applying LOTO</li> <li>• Damaged wiring, burnt insulation, or exposed live parts identified</li> <li>• Unexpected live service encountered when drilling or cutting</li> <li>• Suspected asbestos or hazardous material identified</li> </ul> <p><b>RISK CODE: ELEC-H3</b></p> |

## Safe Work Method Statement

|   | Task                                        | Hazard                                                                                                                                                                                                                                                                        | Risk (Pre)        | Controls                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Risk (Post)    | Responsibility                                                                                                                                                                                                   | CCVS Code                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|---|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5 | <b>Testing, commissioning, and handover</b> | <ul style="list-style-type: none"> <li>Undetected plumbing fault — latent leak after reinstatement</li> <li>Undetected electrical fault — latent shock or fire risk after energisation</li> <li>Premature return to service — occupants exposed to untested system</li> </ul> | <b>Medium (2)</b> | <b>Engineering:</b> <ul style="list-style-type: none"> <li>Pressure test or function test all plumbing works before return to service</li> <li>Electrical test — polarity, earth continuity, RCD trip time — before energisation</li> </ul> <b>Admin:</b> <ul style="list-style-type: none"> <li>Record all test results — retain as compliance evidence</li> <li>Issue Certificate of Compliance — Electrical Work (CCEW) before handover</li> <li>Issue plumbing compliance certificate (where required by jurisdiction or local authority)</li> <li>Remove LOTO devices only after test is complete and area confirmed safe</li> <li>Brief client or occupant on works completed and systems returned to service before leaving site</li> </ul> | <b>Low (1)</b> | <ul style="list-style-type: none"> <li>LIC PLB / LIC ELEC — complete trades tests and issue compliance certificates</li> <li>SUP — confirm test results recorded, certificates issued, client briefed</li> </ul> | <b>HOLD POINT 4</b> <ol style="list-style-type: none"> <li>All tests completed and results recorded</li> <li>Compliance certificates issued before handover or return to service</li> </ol> <b>STOP-WORK TRIGGER</b> <ul style="list-style-type: none"> <li>Leak test or pressure test fails</li> <li>Electrical test fails or fault identified</li> <li>Client or occupants cannot be briefed before return to service</li> </ul> <b>RISK CODE: SYS-L1</b> |

## Safe Work Method Statement

### CCVS TABLE

| Task                                              | Critical Control                                                                                                                        | Who Checks                         | How Often                                            | What They Look For                                                                                               |
|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Service identification and pre-start (Step 1)     | All affected plumbing and electrical services identified and isolation points confirmed before work commences                           | Supervisor                         | Before work commences each day                       | Services marked or tagged; isolation points confirmed and accessible; workers briefed and SWMS signed            |
| Plumbing isolation (Step 2)                       | Water supply isolated at nearest valve and pressure relieved before cutting or disconnecting any pipe                                   | Licensed Plumber                   | Before each disconnect or pipe modification          | Valve closed and tagged; pressure confirmed relieved; drip tray or containment in place                          |
| Electrical LOTO and voltage verification (Step 3) | Circuit isolated by LOTO at switchboard; absence of voltage confirmed with approved tester at work point before touching any conductors | Licensed Electrician               | Before each connection, disconnection, or alteration | LOTO device fitted; personal tag applied; approved tester used and absence of voltage confirmed                  |
| Test and handover (Step 4)                        | All plumbing and electrical tests completed, results recorded, and compliance certificates issued before handover or return to service  | Supervisor / Licensed Tradesperson | At completion of all works                           | Test results signed; CCEW issued; plumbing certificate issued where required; client briefed before leaving site |

## Safe Work Method Statement

**RISK RATING MATRIX — Consequence × Likelihood**

| Risk Level    | Description of Consequence or Impact                                                                                                                                              | Consequence         | Unlikely (1)      | Possible (2)      | Almost Certain (3) |
|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------|-------------------|--------------------|
| <b>HIGH</b>   | Actual/Potential fatality, disability or irreversible damage. Major structural failure. Off-site environmental discharge not contained, significant long-term environmental harm. | <b>Major (3)</b>    | <b>Medium (3)</b> | <b>High (6)</b>   | <b>High (9)</b>    |
| <b>MEDIUM</b> | Actual/Potential temporary disability, MTI or LTI. Structural failure/damage, >1-day outage. On-site environmental discharge contained, minor remediation, short-term harm.       | <b>Moderate (2)</b> | <b>Low (2)</b>    | <b>Medium (4)</b> | <b>High (6)</b>    |
| <b>LOW</b>    | Incident requiring first aid. Environmental discharge immediately contained, minor clean-up, no short-term environmental harm.                                                    | <b>Minor (1)</b>    | <b>Low (1)</b>    | <b>Low (2)</b>    | <b>Medium (3)</b>  |

| Level              | Likelihood / Probability                                              |  |
|--------------------|-----------------------------------------------------------------------|--|
| Almost Certain (3) | Occurs frequently; >66% chance of occurring                           |  |
| Possible (2)       | Could happen occasionally; >33% but <66% chance of occurring          |  |
| Unlikely (1)       | May occur only in exceptional circumstances; <33% chance of occurring |  |
| Class / Ranking    | Description / Requirements                                            |  |
| <b>High 6, 9</b>   | STOP immediately. Implement controls. Controls recorded on a SWMS.    |  |
| <b>Medium 3, 4</b> | Planned control. Controls recorded on a SWMS.                         |  |
| <b>Low 1, 2</b>    | Managed via routine procedure.                                        |  |

Note — WHS Act s.18 "reasonably practicable": Requires consideration of the likelihood of the risk, degree of harm, knowledge of the hazard, availability and suitability of controls, and cost vs. risk. If you cannot show how that decision was made, the action becomes harder to defend after an incident.

# Safe Work Method Statement

| WORKER SWMS INDUCTION SIGN-OFF |       |            |                                                                                                                                                                                              |
|--------------------------------|-------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |

# Safe Work Method Statement

| WORKER SWMS INDUCTION SIGN-OFF |       |            |                                                                                                                                                                                              |
|--------------------------------|-------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |

# Safe Work Method Statement

| WORKER SWMS AMENDMENT SIGN-OFF |       |            |                                                                                                                                                                                              |
|--------------------------------|-------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |

If work methods, site conditions, or hazards change — stop, complete this table, re-brief all workers, obtain new sign-offs. Required under WHS Regulation r.300(3).

| SWMS AMENDMENTS                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------|-------------------|---------------------------------|--------------------|-------------|
| Under WHS Act s18, "reasonably practicable" requires consideration of likelihood of risk, degree of harm, what the person knows about the hazard, availability and suitability of controls, cost vs risk. If you cannot show how that decision was made, the action becomes harder to defend after an incident. |                      |               |                   |                                 |                    |             |
| Date                                                                                                                                                                                                                                                                                                            | Work Activity / Task | Hazard / Risk | Risk Rating (Pre) | Controls — Hierarchy of Control | Risk Rating (Post) | Responsible |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |

Safe Work Method Statement

| WORKER SWMS AMENDMENT SIGN-OFF |       |            |                                                                                                                                                                                              |
|--------------------------------|-------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |
| Date:                          | Name: | Signature: | I confirm I have read and understood this SWMS. I will verify that critical controls are in place prior to commencing high-risk tasks and will suspend work if controls are not established. |

If work methods, site conditions, or hazards change — stop, complete this table, re-brief all workers, obtain new sign-offs. Required under WHS Regulation r.300(3).

| SWMS AMENDMENTS                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------|-------------------|---------------------------------|--------------------|-------------|
| Under WHS Act s18, "reasonably practicable" requires consideration of likelihood of risk, degree of harm, what the person knows about the hazard, availability and suitability of controls, cost vs risk. If you cannot show how that decision was made, the action becomes harder to defend after an incident. |                      |               |                   |                                 |                    |             |
| Date                                                                                                                                                                                                                                                                                                            | Work Activity / Task | Hazard / Risk | Risk Rating (Pre) | Controls — Hierarchy of Control | Risk Rating (Post) | Responsible |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |
|                                                                                                                                                                                                                                                                                                                 |                      |               |                   |                                 |                    |             |

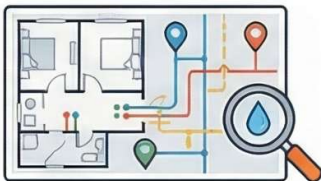
# Safety First: Combined Plumbing & Electrical Workflow



### Mandatory PPE & Licensing

All workers must have a White Card, trade-specific licences, and task-appropriate PPE (AS/NZS standards).

## Phase 1: Site Preparation & Setup



### Service Identification & Briefing

Identify all affected services and mark isolation points before briefing the team on hazards.



### The 'Stop-Work' Triggers

Stop immediately if services cannot be confirmed or if suspected asbestos is encountered.

## Phase 2: Isolation, Execution & Handover



### Plumbing: Isolate & Relieve

Isolate water supply at the nearest valve and relieve pressure before cutting or disconnecting pipes.



### Electrical: LOTO & Verify

Apply Lockout/Tagout (LOTO) at the switchboard and verify the absence of voltage with a tester.



### Final Testing & Certification

Complete all pressure and polarity tests and issue a CCEW/Compliance Certificate before handover.