

# BASIC COSHH RISK ASSESSMENT TEMPLATE










## COMPANY DETAILS

Company Name:		Assessment Date:	
Department:		Assessor Name:	

## SUBSTANCE DESCRIPTION *\*Please attach substance SDS*

Product Name:			
Substance ID/ CAS No:			
Manufacturer/Supplier:			
Location of process:			
Quantity used:	Per Day:	Per Week:	Per Month:
List of materials:  (Complete if substance is a mixture)	Material Name		Quantity present
Description of activity/ work being carried out:			
Persons at risk:	Employees:	Contractors:	Public:

## CLASSIFICATION

								
Gas under pressure	Explosive	Oxidising	Flammable	Corrosive	Health hazard	Acute toxicity	Serious health hazard	Hazardous to the environment

Hazard Type:  (If other, please specify in space below)								
	Gas	Vapour	Mist	Fume	Dust	Liquid	Solid	Other

<b>Routes of Exposure:</b>  (If other, please specify in space below)	Inhalation      Skin      Eyes      Ingestion      Other
	(Empty space for specifying other routes)

### WORKPLACE EXPOSURE LIMIT (WELs)

Material Name	Long-term exposure level (8hrTWA):	Short-term exposure level (15 mins):

### IDENTIFIED RISKS TO HEALTH

<b>Hazard Statement:</b>	(Empty space for hazard statement)
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Control Measures	First Aid Measures

### PPE (state type and standard)

	Dust Mask		Visor
	Respirator		Goggles
	Gloves		Overalls
	Footwear		Other

## STORAGE & DISPOSAL

Handling and Storage	Disposal Method

## RISK RATING

Risk Rating following Control Measures  (Include relevant comments or explanations)					
	Extreme	Very High	High	Medium	Low

## ASSESSOR COMMENTS

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## SIGN-OFF

Assessed by:	
Date:	
Review date:	