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| **Company/ Organisation** |  | **Date** |  |
| **Department** |  | **Review date** |  |
| **Activity** |  | **Author** |  |
| **Hazard** | **Who could be harmed and how** | **All controls required***Put each control on a separate line**Be as clear and specific as possible* | **How controls will be checked***How will each control be checked – e.g. checklists, health surveillance, monitoring, inspections,*  | **Confirmed all in place or further action required** |
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