[Company name]

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Risk assessment

Identify hazards, rate the risk, and record the controls that keep people safe.

Assessment reference: _____

Date: _____

Assessor: _____

Activity / area assessed: _____

Review date: _____

Hazard ratings

Hazard	Who is at risk	Existing controls	Likelihood (1–5)	Severity (1–5)	Risk rating
[e.g. trailing cables]	[Staff, visitors]	[Cable covers, daily checks]			
[e.g. manual handling]	[Warehouse staff]	[Trolleys, training]			
[e.g. lone working]	[Cleaners]	[Check-in calls]			

Additional controls needed

Control	Owner	Due date	Done
[Control]	[Name]	[Date]	
[Control]	[Name]	[Date]	

Rating guide Likelihood: 1 = rare, 5 = almost certain. Severity: 1 = minor, 5 = fatal. Risk rating = likelihood × severity. Act first on the highest ratings.

Sign-off

Assessor: _____ **Approved by:** _____ **Date:** _____