Safe Work Procedure

**NOTE: DO NOT use this machine unless you have been trained in its safe use and operation.**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Description of Work: | | | Using a CNC Milling Machine | | | | | | | | |
| **CNC Milling Machine  Description: SDC10144** | | | | | | **Potential Hazards:** Exposed moving parts and electrical hazard with the potential to cause harm through entanglement, impact and cutting, exposure to projectiles and sharp objects. | | | | | |
| **Personal Protective Equipment (PPE) Required** *(Check the box for required PPE*): | | | | | | | | | | | |
| hand protection Gloves | | dust mask Face Masks | | safety gogglesEyeProtection | face shield Welding Mask | | foot protection Appropriate  Footwear | | hearing prot Hearing Protection | safety apron Protective Clothing | |
|  | |  | |  |  | |  | |  |  | |
| **Safe Work Procedure Checklist:** | | | | | | | | | | | |
| 1. PRE-Operation/Task:   * Ensure task (e.g. Drawings, instructions, specifications etc.) is clearly understood. * Ensure operator wears appropriate PPE (e.g. hearing, eye, clothing and footwear protection). * Ensure all guards are in place. * Check that the work piece is clamped securely in the chuck. * Remove all tools from the bed of the machine. * Ensure correct computer controlled programmable is selected. * Identify ON/OFF switch and emergency stop button (if applicable).   2. Operation/Task:   * Never leave the machine running unattended. * Before making adjustments or measurements switch off and bring the machine to a complete standstill. * Do not attempt to slow/stop the chuck or revolving work by hand. * Avoid letting swarf build up on the tool or job. Stop the machine and remove it.   3. POST-Operation/Task:   * Switch off CNC machine before removing waste material from the machine. | | | | | | | | | | | |
| **Competent Person(s):** (The following persons are authorised to operate, supervise and test students on the equipment/process). | | | | | | | | | | |
| **Name:** | **Title:** | | | | | | | **Contact Details:** | | |
|  |  | | | | | | |  | | |
|  |  | | | | | | |  | | |