Safe Work Procedure

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

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| Description of Work: | | | Using a Leaf Blower (Electric) | | | | | | | | |
| Leaf Blower  Description: toroblower | | | | | | **Potential Hazards:** Exposure to hazards with risks associated with electricity, ergonomics, noise, vibration, slips, trips and falls, and inhalation of dust. | | | | | |
| **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 | |
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| **Safe Work Procedure Checklist:** | | | | | | | | | | | |
| 1. PRE-Operation:   * Conduct visual inspection of electrical leads. * Uncoil the extension cord. * Check on/off switch is working prior to use. * Check guards are fitted, secure and working. * Check for loose/missing nuts, bolts and screws and tighten and/or replace as needed. * Ensure operator is able to stand firmly on stable and safe surface (i.e. ground or work platform). * Wear adequate and appropriate PPE.   2. Operation:   * + Exercise caution in relation to the electrical lead.   + Do not point nozzle at people.   + Do not pull cable around sharp objects.   + Minimise dust by using blower at lower speeds.   + Hold blower firmly.   + Do not use in wet conditions.   + Secure loose clothing.   + Ensure blower is only used where there is adequate ventilation.   + Switch off and disconnect from power supply before removing or replacing the debris bag.   3. POST-Operation:   * Ensure equipment is turned off before proceeding with other tasks * Ensure equipment is returned to storage area after use | | | | | | | | | | | |
| **Competent Persons** (The following persons are authorised to operate, supervise and test students on the equipment/process). | | | | | | | | | | |
| **Name:** | **Title:** | | | | | | | **Contact Details:** | | |
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