

JSA VARIATION FORM

(circle the Division you are carrying out this work for)



SITE DETAILS

ADDRESS.....SUBCONTRACTOR

DATE GENERIC JSA NO.

Risk Indication: Critical = C High = H Medium = M Low =L					
STEP No	JOB/TASK STEP	POTENTIAL HAZARDS	INITIAL RISK	SAFE WORK / CONTROL MEASURES	FINAL RISK

I HAVE PREPARED THIS VARIATION IN CONSULTATION WITH THE PEOPLE PERFORMING THE TASK

Signature:..... Date:

I have read the above JSA and this variation, understand both of them and agree to follow the this variation (all team to sign below)

Team members signatures:.....

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