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**SMS**

390 PINHOE ROAD EXETER EX4 8EF

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## *RISK ASSESSMENT / METHOD STATEMENT*

**CONTRACT:** \_\_\_\_\_

**SITE:** \_\_\_\_\_

**OPERATION**      ***USE OF MOBILE ELEVATED WORK PLATFORMS  
(SCISSOR LIFT – CHERRY PICKER)***

### **HAZARDS**

1. Collision with other vehicular traffic.
2. Arcing or contact with overhead cables or other overhead obstructions.
3. Fall of operative from platform.
4. Materials falling from platform.
5. Entrapment of persons in moving parts or mechanism.
6. Overturning.

### **RISKS**

1. Serious injuries from any of the hazards.

### **RISKS TO OTHERS**

1. Injuries from the hazards 1, 4, 5, 6.

**HAZARD POTENTIAL**                      MAJOR                      **RISK POTENTIAL**                      HIGH

**RISK LEVEL = HAZARD POTENTIAL X RISK POTENTIAL**                      HIGH

### **CONTROLS**

1. All operatives will be over the age of 18 years, trained, certificated and authorised to use and will be responsible for maintenance and reporting of defects.
2. These machines are only to be used on firm flat or well compacted stoned out surfaces.
3. Barriers or cones or fencing will be placed around machine operating area when necessary.

**Risk Assessment / Method Statement USE OF LADDERS cont:**

4. All overhead cables will be fenced off, shrouded or the power disconnected. The local electricity board will be contacted to establish the voltage of the cable and the minimum distance is that the MEWP can safely be used from it or the power be turned off.
5. All operatives will wear a full body harness that must be clipped onto the cage at all times by a short lanyard to prevent the operative from climbing the basket.
6. Materials will not be allowed to accumulate on platform.
7. Guards and fencing on moving parts must always be in place.
8. Machine must only be used on suitable surfaces and operatives must be in possession of necessary information (manual) etc. to enable safe operation of machine.
9. A competent operative must inspect machines weekly and maintain a record.

**Review of Risk Level following application of this Method Statement;**

**LOW**

1	2	3	4
Written By: Peter Nordqvist.	Person accepting responsibility and authorised to make any changes they may decide relevant.	Date amended by person in Col. 2	Date written 140109

**PERSON IN CHARGE TO ENSURE THAT A COPY OF THIS DOCUMENT HAS BEEN PROVIDED TO THE OPERATIVES**

PERSON IN CHARGE PRINT NAME	SIGNED	DATE

**OPERATIVE TO CARRY OUT ABOVE OPERATION IS TO COMPLETE AS HAVING READ AND UNDERSTOOD.**

PRINT NAME	SIGNED OPERATIVE	DATE