Worksheet C2

Risk Assessment – Documentation

Firm _____

Company/Part of Company _____

Working Area* _____

Actitivity* _____

Effective Date _____

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1 No.	2 Possible Hazards/Stresses	3 Risk**			4 Safety Objectives/Measures	5 Implementation		6 Effectiveness	
		Low	Medium	High		By when	Who	Effective/ Date	Who

* Please specify what applies in the respective case.
** Assessment of the risk with the attached matrix.
The form can be downloaded at https://downloadcenter.bgrci.de