

SITE SAFETY PLAN – Forest Permit - Activity No:		
Permit Holder Name:		
Activity:		
Date of Activity:		
Name of State Forest:		
Other site details:		
Risk Management of the Activity Site		
Identify Hazard	Control Strategy	
What can happen and how? (site specific)	How will you eliminate, minimise or manage the identified hazard?	
Prepared by (position and name):	Signature:	Date: