This template document is designed to be adapted to suit your specific needs. We recommend that you get any documents checked by an expert to ensure they comply fully with best practice and current regulations.

## Method Statement

| Job / Project Title: |  |
| :--- | :--- |
| MS Revision Number: |  |
| Date: |  |

## Description of Works

| Task: |  |
| :--- | :--- |
| Time: |  |
| Duration: |  |
| Sequence: |  |
|  |  |
| Location: |  |

## Resources Required

| Personnel \& copies of certificates: |  |
| :--- | :--- |
|  |  |
| Supervision: |  |
| Plant / Equipment: |  |
| Materials, inc weights: |  |
|  |  |

Assessment of Significant Risks for all Tasks (see risk assessment for more detail)

| Access / egress: |  |
| :--- | :--- |
| Place of work: |  |
| Others at risk: |  |
| COSHH, noise, Manual <br> Handling: |  |

Control Measures to be used, including

| Permits: |  |
| :--- | :--- |
| Security: |  |
| Special training: |  |
| Other: |  |
|  |  |

## Personal Protective Equipment

| Equipment Required by Law: |  |
| :--- | :--- |
| Equipment required by Risk |  |
| Assessment: |  |

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## Emergency Arrangements

| Evacuation: |  |
| :--- | :--- |
| Rescue: |  |
| First Aid: |  |

Temporary Amended Systems

| Traffic routing: |  |
| :--- | :--- |
| Pedestrian routing: |  |
| Fire Arrangements: |  |
| Other: |  |

## Communication Routes

| To whom is information is submitted for changing requirements: |  |  |  |
| :---: | :---: | :---: | :---: |
| Confirmation of operatives briefing: |  |  |  |
| Name | Position | Company | Signature |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |

## Monitoring and Compliance

|  | Is responsible for monitoring that this method statement is complied with. |
| :--- | :--- |
|  | Is responsible for supervising $\quad$. |
|  | Is responsible for supervising $\quad$. |

