

**Safe System of Work**  
**OPERATING AND SAFETY INSTRUCTION FOR SEALED AIR INSTAPAC MACHINE**

Name: ..... Training Date:.....

	Instruction	Understood ✓ or X
1	Ensure all PPE supplied is worn when using this machine. Eye protection must always be used, NO EXCEPTIONS.	
2	Familiarise yourself with the controls and ensure you know how to operate the controls correctly. If you are not sure, ask your Supervisor.	
3	Chemical drums are heavy and must only be moved following manual handling procedures.	
4	On completion of production moulds and vacuum table must be cleaned as per your training.	
5	DO NOT USE MACHINE unless trained and authorised to do so by your Manager/Supervisor.	
6	Switch on the wall mounted unit.	
7	Allow warm up cycle to finish. Check level indicators and only commence product if product is available.	
8	Select correct moulds for the pumps to be built.	
9	Switch on dual speed vacuum unit to required power setting.	
10	Cut approximately 1 metre of instamate 90 film. Film can only be used on 1 side as indicated.	
11	Place the film in mould to achieve best result, using levers to achieve suck/blow.	
12	Place correct amount of foam from gun into the mould. Cover with film and close the lid. Tighten both latches.	
13	Wait until the foam sets. Undo the latches, reverse levers to remove the foam from the mould.	
14	Use trimming tool to neaten edges.	
15	Repeat the process until the total amount on the works order is complete.	
16	Using the scraper provided, clean the moulds and boxes to best result.	

I have received the above training and fully understand every point that was explained to me. I confirm that I will wear the required PPE equipment when using the above machinery and take all steps to ensure my own safety. I will ask for further training if I need to and will immediately inform the Supervisor or Manager if there are any issues with the machinery.

Name: .....

Signed: ..... Date:.....

I confirm that I have trained the aforementioned person and that they fully understand how to use the above machinery, have received the required PPE equipment and know to inform me immediately of any issues with the machinery or if they require further training. I authorise this person to use the machinery detailed above.

Name: .....(Authorised Trainer)

Signed ..... Date: .....