

Safe System of Work
OPERATING AND SAFETY INSTRUCTIONS AIR OPERATED NAIL GUNS AND
STAPLERS

Name: Training Date:.....

	Instruction	Understood ✓ or X
1	Explained that safety equipment must be used at all times and why – goggles and ear protection must be provided and used.	
2	Explained particular care must be taken on where you place your hands when firing a nail into timber.	
3	Explained to be aware of your surroundings and make sure there are no hazards/people present in close proximity when using nail gun.	
4	Explained that under no circumstances is an operator to engage in horseplay and/or purposely act in a dangerous manner while using a nailer/stapler. This would be classed as gross misconduct and further action from the police may follow.	
5	Explained how to select the correct fixings for the appropriate task in hand and which fixing particular guns use, to avoid injury.	
6	Explained how to strip and maintain a nailer, using the correct air pressure and lubricating oil.	
7	Explained how to carry out maintenance/reloading nails/changing settings and that this is to be done only after the nailer has been disconnected from the air line.	
8	Explained that only single fire (semi-automatic) operation is to be used whilst operating the nail guns. Do not use bump or automatic modes.	
9	Explained never to leave a nail gun / stapler plugged into the air line ready to be fired. Always disconnect and put tool away.	
10	Explained how to use the depth stop when using nail gun.	
11	Explained never to use other body parts such as knee or feet to support work when using the nail gun	
12	Explained that only trained personnel are to use nail guns and staplers. All personnel must notify a supervisor or manager immediately of anyone using these items who has not been trained.	

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: