

Safe System of Work

Procedure for checking filter system on Aggard Dust Extraction

Name: Training Date:.....

	Instruction	Understood ✓ or X
1	Ensure the filter unit is locked out before accessing the filter unit via the steps.	
2	Ensure the operator does not access step unit to Filter Unit during adverse weather and that conditions do not promote chances of slips, or falling over	
3	Operators must wear appropriate PPE equipment including hi vis vest, hard hat, safety boots at all times, goggles, gloves, face mask and disposable paper suit when accessing the internal of the filter unit.	
4	Always work as a pair with another colleague, do not attempt to work alone.	
5	Use the handrails whilst walking up and down the step unit.	
6	If tools are to be used, perform a tool count and list the items taken up the access steps. These must all be returned before starting the filter unit.	
7	Carefully dispose of any damaged or wet filter bags in an airtight rubbish bag before transporting to the waste skip.	
8	Do not attempt to carry anything heavy up the access steps, try to keep to a maximum of 10kg.	
9	No other staff members or persons visiting the site are permitted to walk under or around the step unit whilst it is in use. Use appropriate signage.	
10	Always replace the restricted access rope back in place when you are finished working on the step unit.	
11	Never allow other persons up the step unit unless they have had adequate training by the Timber products manager.	

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: