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| **Company** |  |
| **Date** |  |
| **Work to be done** |  |

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| **Risks related to work** | **Actions**  | **How is safety ensured?** |
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| **Tools in use** | **Risks related to tools used** | **How are riks taken into account?** |
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**Signatures**

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| --- | --- | --- | --- |
| **Signature** | **Clarification**  | **job** | **date** |
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Continue on the the reverse side of the form