

<b>POS</b>	<b>Risk Assessment</b>	Form Number	SAF - 04
		Revision Number	00
		Revision Date	2015.10.15

### RISK ASSESSMENT SHEET

DOC NO :	Date to Work :
Ship's Name :	Date :
Master :	C/E :
Safety Officer :	Issued :

What Activity to be assessed?	
Major Category :	Process :
Detailed Process :	Activity :

NO	HAZARDS	Probable Risk	Existing Control Measures	F	C	R
1						
2						
3						
4						
5						

Additional Control Measures to reduce risks at Level 3~5 above							
NO	Additional Control Measures				F	C	R
1							
2							
3							
4							

Follow-Up Team	Issued	Issue Date
Additional Controls		