Method statement format

| 1. Record of revisions/additions | | | | | | | | |
|---|-------------------------------|--------------|----------------------|-------------------|-------------------|-------------------|-------------|-----------------|
| Rev: | Date: 01 - 0 | | Details of revision: | | | | | |
| 00 | Original Document | | | | | | | |
| | | | | | | | | |
| 2. Parties to the Contract | | | | | | | | |
| Client: | | | | | | | | |
| PSDP: | | | | | | | | |
| Principal Contractor: | | | | | | | | |
| Contractor | | | | | | | | |
| Sub-Contractor | | | | | | | | |
| Site Management | | | | | | | | |
| Name | ne Comj | | | | Job Title | • | Contact | |
| | | | | | | | _ | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 2 - | | | | | | | | |
| 3. Personnel Protective Equipment Required: | | | | | | | | |
| | | L?Y | | | | | | Name any other: |
| Hi-Viz | Safety | Hard Hat | Cover | Safety | Hearing | Eye | Respiratory | |
| Vest/Jacke | | | Alls | Gloves | Protection | Protection | Protection | |
| | | | | | | | | |
| \checkmark | ✓ | \checkmark | \checkmark | \checkmark | \checkmark | \checkmark | | |
| | No rigger boots allowed | | Task Dependent | Task dependent | Task dependent | Task dependent | | |
| 4. Labor | Requiremen | its: | | | | | | |
| | | | | | | | | |
| 5. Plant & Equipment Required: | | | | | | | | |
| 6. Traini | ng | | | | | | | |