

DEVON AND SOMERSET FIRE AND RESCUE SERVICE RA3 - WORK EQUIPMENT ASSESSMENT

	Equipment Description	IVECO DAILY Daily 70C18D 4x2						
	Equipment Ref. No.	RIV						
	Identification No.	Registration and Asset Call sign						
	Use of Equipment.	Tier 1 Fire Fighting and Rescue Appliance						
	Location where equipment	is to be used. Stations to be confirmed based upon the Tiered Response Model						
Note	(Please tick as appro Is this Satisfactory	opriate). Y = Ye Y = Ye		NA = Not applicable				
NB. If the answer is unsatisfactory, a risk assessment or other information will need to be supplied.								
Is this satisfactory?								
				Is this satisfactory?				
Exis	ting Control Measures	Y	N NA	Is this satisfactory?				
Exis 1.	ting Control Measures Does the equipment conform to appropriate legislative standards?	Y N	N NA					
	Does the equipment conform to	X		YN				
	Does the equipment conform to appropriate legislative standards?	BS EN 1846-1:20 1846-3:2013 arked 'CE' if new. If	011, EN 1846-2:	Y N X 22009+A1:2013, EN				
	Does the equipment conform to appropriate legislative standards? What are those standards? NB. The equipment should be m	BS EN 1846-1:20 1846-3:2013 arked 'CE' if new. If sued.	011, EN 1846-2:	Y N X 22009+A1:2013, EN				
1.	Does the equipment conform to appropriate legislative standards? What are those standards? NB. The equipment should be m conformity should have been issued to be the equipment should be made to be a second to be the equipment should have been issued to be the equipment should be made to be a second to b	BS EN 1846-1:20 1846-3:2013 arked 'CE' if new. If sued. This X Duld be provided by NO the evidence of e or issue of the equal to the sue of the equal to the e	the supplier. If conformity should be supplied to the supplier of the supplier. If the supplier is the supplin	Y N X 2009+A1:2013, EN E Mark a certificate of X YES this should be add be acquired from				

2.

3.

Is this satisfactory?

		Y	N	NA			Y	N	
4.	Will the equipment be subjected to a periodic inspection or test?	X					X		
5.	If YES has this been set up and approved?	X					X		
6.	What is the frequency of any inspection / to	est?	Daily/V	Veekly/	Quarte	rly/	Annual		
7.	How will the test be recorded?	Standard Test Sh Routines			Sheet:	t: Vehicle "A" and "B"			
8.	Who is responsible for ensuring that the tes	st is carı	ried out a	and reco	orded?	5	Station-	Watch	Manager
9.	Has the responsible person been given adequate information, instruction and/or training for ensuring the test is carried out and recorded?	X					X		
10.	Is the equipment to be restricted to staff who are trained and instructed in its use?	X					X		
11.	Are all dangerous parts of the equipment guarded or interlocked so far as practicable?	X					X		
12.	Is fail to safe protection in place?	X					X		
13.	Is there sufficient lighting provided to ensure safe operation?	X					X		
14.	Are hot/cold parts protected as appropriate?	X					X		
15.	Is the equipment secure to help prevent hazards?	X					X		
16.	Are suitable H&S warning signs required?	X					X		
17.	Where required, do H&S markings conform to Safety Signs and Signals Regulations?	X					X		
18.	Are the stop/start controls easily	X					X		

Is this satisfactory?

19.	Can the operator ensure no one is in the danger zone when the								
	equipment is operated?	X				X			
20.	Is a safe system of work required to prevent anyone entering the danger zone whilst the equipment is operating?	X				X			
21.	Can the equipment be maintained with the equipment stopped?	X				X			
NB. I	f No, a Safe System of Work will need to	be devi	ised.						
22.	Can the equipment be isolated from its energy source?	X				X			
23.	Does the Noise level of the equipment exceed 80db?	X				X			
24.	Does the information from the supplier / manufacturer include vibration levels?	X				X			
25.	Do additional risk assessments need to be completed?	X				X			
	NB. All additional risk assessments and information should be attached to this form and a copy must be forwarded to the H&S Department.								
26.	What training requirements are needed for this equipment?								
	1Vehicle familiarisation for drivers	3							
	2								
	3								
	4								
	5								
	Additional comments, if any:								
	RA2, RA6 also completed and on file								
	RA2, RA6 also completed and on file	e							
	RA2, RA6 also completed and on file	2							

Assessment Completed By: (BLOCK CAPITALS)								
NAME	S40(2)(a) FOIA 2000		POSITION	SM Research & Development				
SIGNAT	URE							
DATE O	F ASSESSMENT	29/03/18						
REVIEW	/ DATE	29/03/2020						