



WARWICKSHIRE  
COUNTY COUNCIL

## WARWICKSHIRE COUNTY COUNCIL

### RISK ASSESSMENT For .....

Name of Assessor: ----- Assessor's Signature: ----- Date -----

Activity/ Process/ Operation	What are the Hazards to Health and Safety	What Risks do they pose and to whom?	Risk Level H/M/L	What precautions have been taken to reduce the risk?	Risk Level Achieved H/M/L	What further action is needed to reduce the risk