## Step 4 - Health and safety policy (Risk Assessment Form – A4)

This is the statem	nent of general	policy and arran	gements for: (Name	of company)				
(Name of Employer/Seni	or manager)		has overall	and final respo	nsibility fo	r health and safe	ty	
(Member of staff)			has day-to-o	day responsibi	lity for ensu	ring this policy	is put into practice	
Responsibility of: Name/Title	Statement of g	general policy		Action/Arrangements (What are you going to do?)				
	Prevent accident health and safety							
	Provide clear instensive ensure employee							
	Engage and conscions	sult with employees o	n day-to-day health and safety					
	Implement emerg							
	Maintain safe and plant, equipment substances							
Signed: * (Employer/Business Owner)				Date:				
(=,)011/200						1		
Indicate location where Health and safety law poster is displayed. If not displayed, indicate where it should be.			<indicate here=""></indicate>					
Indicate if First-aid box is present. If yes where, if no, indicate where it should be.			<indicate here=""></indicate>					
Indicate if Accident book is present. If yes where, if no, indicate where it should be.			<indicate here=""></indicate>					