Plant - Compliance Review

Please list plant & equipment owned/operated by your department & plant located within workshops & laboratories.
(Note: exclude lifts, air conditioning, & plant associated with building operation.

Campus:	
Department:	
Contact Name:	
Phone / Fax Number	

Plant Location (Rm.)	Plant Item	Has Plant assessment been undertaken in accordance with OHS Regulations 2007			Does Plant require registration?				Does plant require Certificate of Competency to operate?				Has operator been inducted and trained in use of equipment?		Contact supervisor (Print)
		Date	Attach Details	No	Yes	Attach details	Unsure	No	Yes	Attach Details	No	Unsure	Yes	No	