



## WHS-FOR-006.1 Toolbox Talks

<b>PROJECT/AREA:</b>			
<b>NAME OF PRESENTER:</b>		<b>SIGNATURE OF PRESENTER:</b>	
<b>DATE:</b>		<b>TIME:</b>	
<b>PEOPLE PRESENT</b>			
<b>NAME</b>	<b>SIGNATURE</b>	<b>NAME</b>	<b>SIGNATURE</b>
<b>TOPICS DISCUSSED AND FEEDBACK</b> (Examples: workplace specific risk assessment, specific activity training, SWMS, safety of vehicle loading & unloading, traffic management & parking, overhead electric lines, underground services, falls, safe delivery, documentation & workplace security.)			
<b>TOPIC</b>	<b>DETAILS</b>		<b>ACTIONS/RESPONSIBILITIES</b>
<b>COMMENTS/FEEDBACK</b>			

Please email completed toolbox to [safety@harbourtrust.gov.au](mailto:safety@harbourtrust.gov.au) and file for your own records.