PROCEDURE FOR OSH RISK MANAGEMENT

Occupational Health & Safety Management System (ISO 45001:2018)

FALCON MIDDLE EAST CONTRACTING AND GENERAL MAINTENANCE – SOLE PROPRIETORSHIP L.L.C.

Mussafah MW4, Plot 100 Abu Dhabi, United Arab Emirates

Document & Record Control

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Review and Approval

Task	Author	Designation	Signature
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1.0 PURPOSE

The purpose of this procedure is to establish, implement and maintain a process for defining the identification of OSH hazards & risk. In addition, this procedure aims to provide and specify the methodology of risk assessment and the development of risk control as appropriate.

2.0 SCOPE

This procedure is applicable to all personnel with specific OSH roles & responsibilities necessary for successfully implementing the Occupational Safety and Health Management System in compliance with the requirements of ISO 45001:2018.

3.0 ROLES AND RESPONSIBILITIES

The **General Manager** is mainly responsible in ensuring that hazards and risks are maintained to a level as low as practicable across all levels and activities of the organization. It also ensures that all resources are available to implement this policy and control measures to manage hazards and risks.

The **QHSE Management Representative along with the HSE Officer/In-charge** is responsible for:

- Ensuring that hazard identification, risk assessment and their management is implemented by all departments of FALCON MIDDLE EAST
- Assist supervisory personnel in hazards review and control process.
- Assist supervisory personnel in staff training on hazard identification and control.
- Facilitate the implementation, updating, coordination, monitoring and reporting of the of the risk assessment performance

The **Supervisory or Engineers** is responsible to:

- Educate, instruct and encourage staff to participate in Hazard Identification and Control process.
- Ensure training of staff regarding hazard identification.

All **staff** is responsible to:

- Participate in the hazard identification and control process.
- Notify supervisory personnel of any safety concerns or hazards(s) present at the workplace.

4.0 TERMS AND DEFINITION

Terms	Definition
Hazard	Source, situation, or act with a potential for harm in terms of human injury of ill-health, or a combination of these.
Hazard Identification	Process of recognizing that a hazard exists and defining its characteristics.
Elimination	Process of removing the hazard. (Example: eliminating a requirement to carry out the task, or the use of a piece of equipment or chemical.)

Terms	Definition
Substitution	Process of replacing a material, plant or work practice with a less hazardous one. (Example: replacing a hazardous chemical with a less hazardous one.)
Engineering Controls	Process of engineering the solution to minimize the risk. This type of control is highly desirable as the process reduces the reliance on human behaviour to effect long lasting positive change. There are number of aspects to engineering controls.
Administrative Controls	Process of putting signage, labels, posters, stickers, etc. to warn personnel of the existing hazards involve.
Personal Protective Equipment	The Personal Protective Equipment (PPE) is the last and least effective control method used. It involves staffs and employees to wear appropriate PPE such as steel-mesh gloves, safety shoes, helmets, aprons, goggles, ear muffs, etc. to isolate the person from the hazards. Any breakdown of the system immediately exposes the worker to the hazard. This control method is not highly effective because it relies totally on human behaviour. PPE often forms part of a 'short term' control method.
Incident	Work-related event(s) in which an injury or ill-health (regardless of severity) or fatality occurred, or could have occurred. An 'accident' is an incident which has given rise to injury, ill-health or fatality. An incident where no injury, ill-health or fatality occurs may also be referred to as a 'near-miss', 'close call', or 'dangerous occurrence'. An 'emergency situation' is a particular type of incident.
Risk	Combination of the likelihood of an occurrence of a hazardous event or exposure(s) and the severity of injury or ill-health that can be caused by the event or exposure(s).
Risk Assessment	Process of evaluating the risk(s) arising from a hazard(s), taking into account the adequacy of any existing controls, and deciding whether or not the risk(s) is acceptable.
Risk Management	Risk management is: "the culture, processes and structures that are directed towards realizing potential opportunities while managing adverse effects."
Risk Register	List of hazards, associated risks (pre and post control) and controls, sorted according to highest and lowest risk.

5.0 PROCEDURE

The aim of risk assessment is to identify potential sources of harm and loss and put in place adequate controls or preventive measures before they result in an accident or illness. The key stages are as follows:

5.1 SELECT A TEAM

The General Manager along with the QHSE Management Representative and HSE Officer spear head the Risk Management process. He initiates the selection of the team who will identify hazards and assess risks.

People responsible for carrying out hazard identification and risk assessment survey must have the necessary skills. The team should include a person who has direct relation with the area to be assessed. This could be the area supervisor or any other employee from that area.

5.2 IDENTIFYING THE HAZARD

This step seeks to identify the hazards and risks to be managed;

Comprehensive identification using a well-structured systematic process is critical, because a hazard or risk not identified at this stage may be excluded from further analysis.

Identification shall include actual and potential risks, whether or not they are under control of the entity, and shall cover all routine and non-routine activities of all persons having access to the work place. Human behaviour shall also be taken into account. Furthermore, this will consider the following factors:

- machinery, equipment and materials
- activities of all personnel having access to the workplace including employees, subcontractors, suppliers, visitors and enforcers
- Relevant legal and other requirements
- Facilities at the work place
- Known hazards (e.g. hazardous materials, gases, chemicals, etc)
- Environment
- Design of work areas
- Incident reports
- Known near misses
- Who/what may be harmed
    - employees
    - contractors
    - visitors
    - environment
    - entities
    - machines/equipment/property
    - the public.

The aim is to generate a comprehensive list of sources of risks and events that might have an impact on the achievement of each of the objectives identified in the context.

5.3 FIVE (5) STEPS OF RISK ASSESSMENT

Step 1 – Identify the hazards
Step 2 – Decide who might be harmed and how
Step 3 – Evaluate the risk and decide on precaution
Step 4 – Record your findings and implement them
Step 5 – Review your assessment and update if necessary, don’t overcomplicate the process



5.3.1 STEP 1 IDENTIFY THE HAZARD

First, need to work out how people could be harmed. When work in a place every day it is easy to overlook some hazards, identify the ones that matter:

- Walk around the workplace and look at what could reasonably be expected to cause harm.
- Consult employees or the representatives what they think. They may have noticed things that are not immediately obvious.
- Visit the (Health & Safety, Environment) HSE website. HS publishes practical guidance on where hazards occur and how to control them.
- Check manufacturers' instructions or data sheets for chemicals and equipment as they can be very helpful in spelling out the hazards and putting them in their true perspective.
- Analyse accident and ill-health records – these often help to identify the less obvious hazards.
- Remember to think about long-term hazards to health (e.g. high levels of noise or exposure to harmful substances) as well as safety hazards.

5.3.2 STEP 2 DECIDE WHO MIGHT BE HARMED AND HOW

It is to be clear about who might be harmed for each hazard identified; it will help to identify the best way of managing the risk. That doesn't mean listing everyone by name, but rather identifying groups of people (e.g. people working in the storeroom' or 'passers-by').

- Some workers have particular requirements, e.g. new and young workers, migrant workers, new or expectant mothers and people with disabilities may be at particular risk. Extra thought will be needed for some hazards;
- Cleaners, visitors, contractors, maintenance workers etc., who may not be in the workplace all the time;
- Members of the public, if they could be hurt by your activities;
- Consult staff if they can think of anyone that has been missed.

5.3.3 STEP 3 EVALUATE THE RISK AND DECIDE ON PRECAUTIONS

After the identification of hazards then decide what to do about them. The law requires doing everything 'reasonably practicable' to protect people from harm.

First, look at what are already in practice; think how the work is organized. Then compare this with the good practice and see if there are more controls required to bring the risk assessment up to standard.

Consider:

- How to get rid of the hazard altogether?
- If not, how to control the risks so that harm is unlikely?
- When controlling risks, apply the principles below, if possible in the following order:
- Try a less risky option (e.g. switch to using a less hazardous chemical);
- Prevent access to the hazard (e.g. by guarding);
- Organize work to reduce exposure to the hazard (e.g. put barriers between pedestrians and traffic);
- Issue personal protective equipment (e.g. clothing, footwear, goggles etc); and
- Provide welfare facilities (e.g. first aid and washing facilities for removal of contamination).

The level of risk is calculated by multiplying the Consequence Score and Probability of Occurrence together:

Risk = Consequence Score x Likelihood of Occurrence

Involve staff, so that you can be sure that what you propose to do will work in practice and won't introduce any new hazards.

The most pertinent information sources and techniques shall be used when analysing consequences and likelihood. Sources of information may include the following:

- Past records;
- Practice and relevant experience;
- Relevant published literature;
- Economic, engineering or other models; and
- Specialist and expert judgments.

Following on from the analysis for likelihood and consequences, FALCON MIDDLE EAST assign a risk rating to the hazard. Using the table below provides a consistent method of assessment that can be applied by different personnel and at different times.

1. Severity Criteria

Severity Level	Descriptor	Description / Examples
1. Insignificant	Minor impact	No injury or very slight harm (e.g., small bruise, negligible damage). First aid not required.
2. Minor	Minor injury	First-aid–level injury, short-term discomfort. No lost time.
3 . Moderate	Injury requiring medical treatment	Injury requiring medical attention, short-term lost time, reversible harm.

Severity Level	Descriptor	Description / Examples
4. Major	Serious injury	Major injury such as fractures, significant lost time, long-term or irreversible harm.
5.Catastrophic	Fatality / Multiple serious injuries	Single fatality or multiple major injuries. Permanent disability.

2. Likelihood Criteria

Likelihood describes how probable it is that harm will occur:

Likelihood Level	Descriptor	Description / Examples
1 – Rare	Very unlikely	Could occur only in exceptional circumstances.
2 – Possible	Low probability	Could occur, but not expected. History of few or no incidents.
3 – Likely	May occur	Has happened before; realistic chance.
4 – Often	High probability	Will occur in many circumstances. Regular incidents or near-misses.
5 – Frequent	Expected	Event is expected to occur frequently.

	CONSEQUENCE				
PROBABILITY	**Insignificant 1**	**Minor 2**	**Moderate 3**	**Major 4**	**Catastrophic 5**
Rare-1	1	2	3	4	5
Possible-2	2	4	6	8	10
Likely-3	3	6	9	12	15
Often-4	4	8	12	16	20
Frequent-5 Almost Certain	5	10	15	20	25

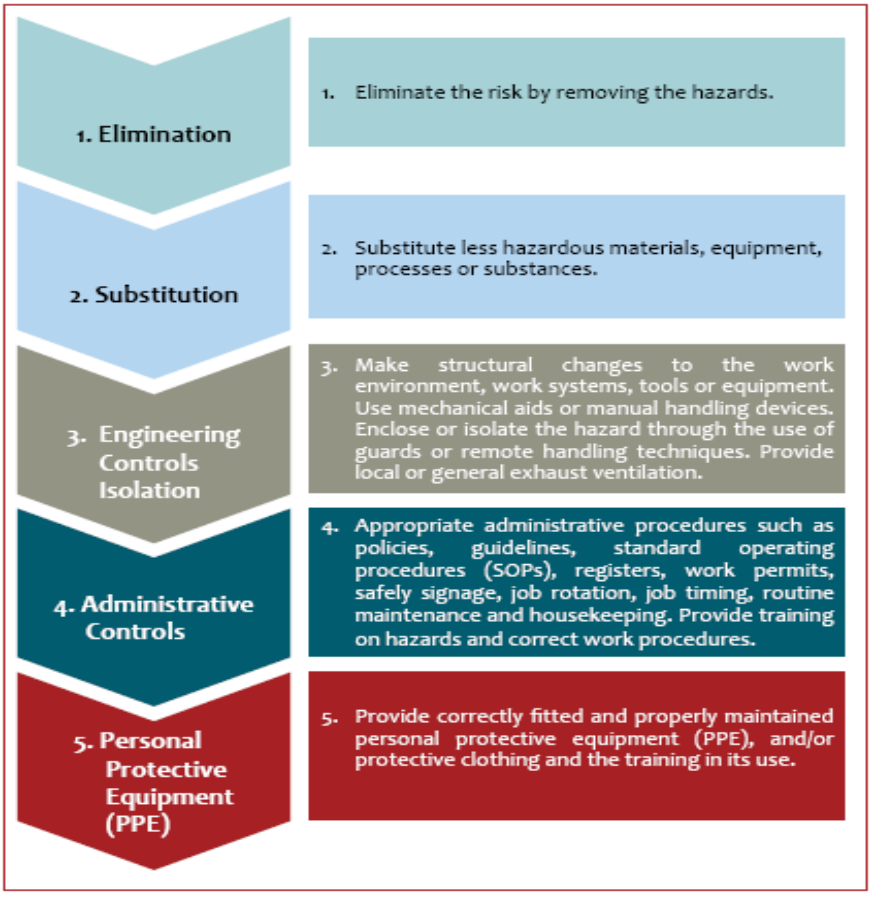
15 to 25	Extreme Risk	Activity or industry should not proceed in current form
8 to 12	High Risk	Activity or industry should be modified to include remedial planning and action and be subject to detailed OSH Assessment
4 to 6	Moderate Risk	Activity or industry can operate subject to management and / or modification
1 to 3	Minor Risk	These are near misses, root causes for these need to found to prevent escalation of risk

5.3.4 STEP 4 RECORD FINDINGS AND IMPLEMENTATION OF CONTROL MEASURES

The General Manager together with QHSE Management Representative and HSE Officer, in consultation with other Department Heads, staffs, employees, contractors and stake holders, shall identify those hazards that are present in FALCON MIDDLE EAST offices, buildings, factory sites, facilities, events and activities; and shall assess the risk of each identified hazards in accordance with the hierarchy of control.

Health & Safety Hierarchy of Control Measure is as follows:

1. Elimination
2. Substitution
3. Engineering Controls / Isolation
4. Administrative Controls
5. Personal Protective Equipment (PPE)



OSH Hierarchy of Control

The General Manager and Management or HSE Officer shall make the final decisions on the controls to be implemented and undertake one or more of the following actions:

- Issue a notice to concerned Department Head and/or staff informing them to eliminate and control the identified 'HIGH' and 'EXTREME' risks by applying an established control from an existing risk assessment.
- Issue a notice to partially control the risk (including isolation) and refer to a more senior officer.
- Request advice from advisers/consultants;
- Refer to HSE Representative for further assessment and decision.

OSH Risk Register is maintained to record the results of the risk assessments. The aim of the risk register is that it should be a point of reference to indicate that the risk have been assessed and the criteria used in the assessment.

5.3.5 STEP 5 MONITORING AND REVIEW

Risk assessments shall be reviewed and assessed, by the HSE Officer along with the QHSE Management Representative, once a year or when circumstances dictate like when new materials and equipment are introduced or following significant changes in work practices and premises, and when monitoring shows that the control measures are not working properly.
Risk assessments shall be communicated to the employees through electronic mail, HSE Committee meetings. Employees must receive appropriate training to enable them to take control of specific risk as they arise.

The FALCON MIDDLE EAST shall review the risk assessment documentation and related records when there are changes to:

- The process or the work environment changes including the job, task or activity performed is changed (e.g. new tools, new methods);
- Changes to the layout of facility or work area;
- Relocation to new facilities;
- In the event of an incident / accident, including illness;
- On the advice of a duly appointed inspector / enforcement officer or appointed third party;
- Request from an FALCON MIDDLE EAST member of staff or contractor;
- On advice from an authoritative and competent source – supplier, consultant etc.;
- Or any other reasonable justification or event.

6.0 REFERENCE DOCUMENTS

- FALCON-PRO-17-FRM 01 OSH Risk Register

TAQA Distribution طاقة للتوزيع

ACTION TRACKING REGISTRY

Inspection / Audit No.	Type	Classification of Observation	Business Line	Region	Inspection Date MM/DD/Y	Report Date MM/DD/Y	Project No.	Main Contractor Company Name	Consultant Company Name	Observer Name	Section (applicable only for Inspection)	Observations / Action Title or Description	TAQA ESSENTIAL SAFETY RULES (ESR	Re
01653/2025-2026	PTW Audit	OFI	Power	Abu Dhabi	04/21/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Permit to Work (PTW) System	Excavation checklist missing at site	EXCAVATION & GROUND DISTURBANCE	Excavat Excavat out the
01653/2025-2026	PTW Audit	OFI	Power	Abu Dhabi	04/21/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Others	Work register(TBT) names are not mentioned in (Sign Off)	OTHERS	Onsite c workers
SHM5-356	PTW Audit	OFI	Power	Abu Dhabi	04/23/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Permit to Work (PTW) System	LAP number not mentioned in Excavation permit	EXCAVATION & GROUND DISTURBANCE	LAP num rectifica
SHM5-356	PTW Audit	OFI	Power	Abu Dhabi	04/23/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Permit to Work (PTW) System	Trail hoes not metioned in excavation permit	EXCAVATION & GROUND DISTURBANCE	Onsite r
Sector-W02WS	Hazard Observation	Behavioural Observation	Power	Abu Dhabi	04/24/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Manual Handling / Ergonomics	Mr. Gulfraz not wearing the safety gloves during work	PERSONAL PROTECTIVE EQUIPMENT	Gloves i given by
03224/2025-2026	PTW Audit	OFI	Power	Abu Dhabi	05/23/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Mark Antony	Permit to Work (PTW) System	soil type is not mentioned in the excavation permit	EXCAVATION & GROUND DISTURBANCE	Excavat type is r
DC5219281	Campaign	OFI	Power	Abu Dhabi	06/03/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Dukes team	Others	Campaign for heat stress management	OTHERS	Campai
DC5230890	Campaign	OFI	Power	Abu Dhabi	06/22/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Dukes team	Others	Campaign for heat stress management	OTHERS	Campai
DC5227823	Campaign	OFI	Power	Abu Dhabi	01/07/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal		Campaign for Excavation and Emergency Preparedness	EXCAVATION & GROUND DISTURBANCE	Excavat
DC5280326	PTW Audit	OFI	Power	Abu Dhabi	07/14/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Permit to Work (PTW) System	LMRA weather condition section its mentioned as normal weather	OTHERS	Onsite r
DC5231686	PTW Audit	OFI	Power	Abu Dhabi	07/16/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Ravinder Singh Jaswal	Permit to Work (PTW) System	LAP number not mentioned in Excavation permit	EXCAVATION & GROUND DISTURBANCE	LAP num rectifica
DC5281155	Campaign	OFI	Power	Abu Dhabi	07/15/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Dukes team	Others	Campaign for heat stress management	OTHERS	Campai
SIR-18.Aug.26.AD-FALCON	T&D Inspection	OFI	Power	Abu Dhabi	08/18/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Engr. Roy Stanley Amuegbunam	Access, Egress & Walkways	Site access point marked by "SITE ACCESS" signage is unmanned, with the barrier left open and no entry/exit attendance log in place to record personnel or visitor movement into the site.	RESTRICTED AREA ENTRY	
SIR-18.Aug.26.AD-FALCON	T&D Inspection	OFI	Power	Abu Dhabi	08/18/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Engr. Roy Stanley Amuegbunam	Excavations & Ground Disturbance	Workers laying cable in an unshored trench with unprotected, near-vertical Type C soil walls showing signs of edge sloughing. Only an unmarked ramp provided for access, with no sloping, benching, or trench box in place.	EXCAVATION & GROUND DISTURBANCE	
SIR-18.Aug.26.AD-FALCON	T&D Inspection	OFI	Power	Abu Dhabi	08/18/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Engr. Roy Stanley Amuegbunam	Excavations & Ground Disturbance	Excavated spoil heaped close to the excavation edge at excessive height, increasing surcharge load and collapse risk. Spoil not set back the required minimum distance from the edge, and no clear pedestrian walkway maintained around the excavation.	EXCAVATION & GROUND DISTURBANCE	
SIR-18.Aug.26.AD-	T&D Inspection	OFI	Power	Abu Dhabi	08/18/26	04/21/26	D111661E	FALCON MIDDLE EAST CONTRACTING AND MAINTENANCE	NA	Engr. Roy Stanley Amuegbunam	Excavations & Ground Disturbance	Interlock floor tiles stacked in the narrow walkway between the barrier and the soil spoil pile, further restricting pedestrian passage and creating an unsafe	EXCAVATION & GROUND	

Excavation Permit to Work

TAQA

CANCELLATION SECTION (To be filled by Authorized Person)

I, as **Authorized Person**, have inspected the **work** covered by this permit and I am satisfied that it is fit for operational service.

THE SAFETY DOCUMENTIS HEREBY CANCELLED

Name Saddam ..... Certificate Number D5070 ..... Date 9/4/26 ...Time 10:00

Has the work extended beyond the safety document validity? ☐ Yes ☐ No

If Yes, please indicate the new Safety Document number: Safety Document No...../20.....Mobile Number ..... Signature...

Emergency Number .....

SUSPENSION SECTION

	Suspended	Cancelled	Suspended	Cancelled	Suspended	Cancelled
Date/Time						
Card No.						
Sign						
OpCo Project Manager/ Project Consultant Informed	☐	☐	☐	☐	☐	☐
OpCo Project Manager/ Project Consultant Name						
OpCo Project Manager/ Project Consultant Card No						

Conditions:

1. If for any reason the activities covered by the different Safety Documents shall be stopped, the Safety Document can be suspended.
2. Prior to the suspension, the AP and CP shall assess which safety precautions implemented under the Safety Document shall remain active despite the suspension.
3. Based on the above, the suspension section of the Safety Document shall be filled, and the relevant precautions shall remain active based on general site and personnel safety considerations.
4. When it is required to remove the suspension, the implemented controls shall be re-evaluated to confirm validity. The cancellation of the suspension shall be filled in the relevant section of the Safety Document.

TRANSFER SECTION

We hereby declare that we have satisfied ourselves that the Equipment stated above is safe to work on and that the Outgoing CP has explained the precautions to achieve Safety from the System as well as General Safety to the Incoming CP:

	1st Transfer		2nd Transfer	
Date/Time				
Reason for Transfer				
Control Person Name				
Control Person Certificate #				
	Outgoing CP	**Incoming CP**	**Outgoing CP**	**Incoming CP**
Name				
Certificate #				
Valid Certificate	☐	☐	☐	☐
Mobile No.				
Signature				

Conditions:

1. Incoming CP's certificate must have the same mentioned scope as this safety document.
2. The outgoing CP shall hand over to the incoming CP on-site and all safety precautions are verified and understood by the incoming CP.
3. Transfer of permit shall be approved by the AP and communicated to the Control Person.
4. There are no changes in the environment impacting the validity of the risk assessment.
5. In case any of the above conditions are not met, the incoming CP shall request the AP to visit the site and confirm whether a new safety document shall be issued or the job can proceed as is.

EXTENSION SECTION

	1st Extension	2nd Extension
Date/Time		
Valid Until		
AP Name and Signature		

Conditions:

1. The maximum validity of each extension is 3 days starting from the extension date.
2. AP and CP shall mutually approve the extension of the permit when the validity date expired and still work needs to be performed; revalidation of the permit shall be communicated to the Control Person (in O&M) and Project Consultant/ Engineer for Capital Projects. For planned works, Operations Planning must agree to the extension to control any simultaneous works.
3. Both the AP and CP must be on-site during the extension process to verify all risks are controlled.

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		Version: 01
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Notes: *Form must be completed at the worksite by Authorised Person and/or Competent Person responsible for activity and Work Team.*

Site:	DC5373400 M38-3	Date:	09/11/2026	Time:	7:40

What task is being performed today?

Excavation and laying 2x4CX 185 sq cable as per HO scope.

I hereby declare that PTW No. 001/2026 has been shown to all workers registered below for this work.

RISK ASSESSMENT

Use this Hazard Checklist, SD, Method Statements and/or Safe Work Procedures to supplement the hazards and risk identification process.

Category	Check Question / Reminder	Yes	No	N.A
Electrical	Has the condition of the apparatus remained unchanged from what was expected?	☑	☐	☐
	Is the risk from proximity to the system, including touch and step potential, controlled?	☑	☐	☐
	Are barricades and barriers effective and in place?	☑	☐	☐
	Has isolation, LOTO, testing, and earthing been applied as required by the safety document?	☐	☐	☑
Mechanical	Has mechanical isolation / LOTO / try and test been confirmed as effective?	☐	☐	☑
	Has draining, bleeding, and venting been completed where required?	☐	☐	☑
Working at Height	Has scaffold and structural stability been checked and confirmed?	☐	☐	☑
	Have ladders, aerial devices, or access equipment been checked and found fit for use?	☐	☐	☑
Slips, Trips and Falls	Are slippery or uneven surfaces identified and controlled?	☑	☐	☐
	Are trench covers in place where required?	☑	☐	☐
	Are walkways, openings, and excavations identified and made safe?	☑	☐	☐
Weather	Are weather conditions suitable for safe work, including rain, wind, heat, or cold?	☑	☐	☐
	Have sandstorm, high humidity, or similar environmental concerns been considered?	☐	☐	☑
Animals / Insects	Is the work area free from dogs, wild animals, or other animal hazards?	☐	☑	☐
	Is the work area free from insects or reptiles that may affect safe work?	☐	☑	☐
Fire Hazards	Have loose combustible materials been removed from the work area?	☑	☐	☐
	Are flammable substances identified and controlled?	☑	☐	☐
	Are gases, fumes, or smoke present, and if so, are they controlled?	☑	☐	☐
Supervision	Is the level of supervision adequate for safe execution of the work?	☑	☐	☐

Category	Check Question / Reminder	Yes	No	N.A
Pollution / Environment	Is there any ground pollution that may affect the work?	☐	☑	☐
	Is there any water pollution risk that may affect the work?	☐	☐	☑
	Is there any air pollution, dust, or emission risk that may affect the work?	☐	☐	☑
Vegetation	Has any tree cutting, trimming, or vegetation control been identified and properly controlled?	☑	☐	☐
	Is any vegetation creating a risk to safe operations or access?	☐	☑	☐
Occupational Hygiene	Are noise levels acceptable for safe communication and work?	☐	☐	☑
	Is lighting adequate for the task?	☐	☐	☑
	Is ventilation adequate for the work area?	☐	☐	☑
	Are chemicals, fumes, vapours, or dust controlled?	☐	☐	☑
Lifting Machines	Are lifting controls available for the lifting activity?	☐	☐	☑
	Has the condition of lifting equipment been checked?	☐	☐	☑
	Have rigging and slinging arrangements been planned and confirmed?	☐	☐	☑
Vehicle and Driver Safety	Have vehicles, plant, or mobile equipment been checked for abnormalities?	☐	☐	☑
	Is the physical and mental condition of drivers / operators fit for safe work?	☐	☐	☑
	Have terrain, route, or ground condition risks been checked?	☐	☐	☑
Roadside Work	Are excavations clearly demarcated?	☑	☐	☐
	Is barricading in place where required?	☑	☐	☐
	Are notices and warning signs in place?	☑	☐	☐
	Is traffic control implemented where required?	☑	☐	☐
Behavioural Safety	Are all team members physically and mentally fit for the work?	☑	☐	☐
	Are members of the public protected from exposure to worksite hazards?	☑	☐	☐

TAQA Distribution	Last Minute Risk Assessment (LMRA) and Toolbox	Effective Date: 01-07-2025
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PPE REQUIRED AS PER PPE MATRIX

Coverall (Acid/Normal)	Pants	Top	Dust Coat	Apron	Hard Hat	Gumboots	Safety Shoes	Safety Glasses
								
☐	☐	☐	☐	☐	☑	☐	☑	☑
Face Shield	**Welding Helmet**	**Dust Mask**	**Respirator**	**Ear Protector**	**Fall Arrest System**	**Gloves**	**Operating Clothing**	
							CAUTION PROTECTIVE CLOTHING REQUIRED IN THIS AREA	
☐	☐	☐	☐	☐	☐	☑	☑	
Reflective Vest	**Voltage Rated Gloves**	**Arc Flash Suits**	**Arc Rated Face Shield**	**Additional PPE's Required (If Any)**				
								
☑	☐	☐	☐	☐				

WORKERS REGISTER

I declare that the nature and location of this work/activity, as well as the precautions, special conditions, the hazards involved and the right to refuse have been explained to the workers.

Name: AHMAD **Competency Card No.:** D52497 **Signed:** AHMAD

Work Team Members Acknowledgement

I understand the scope of work and the hazards associated with the task that I am going to perform. I further undertake to work according to the Task Manuals and/or Safe Work Procedures and as per control measures mentioned within this risk assessment that were discussed with me.

Sign On / Working					Sign Off / Withdrawn	
No.	**Name (Print)**	**U/No. / ID No.**	**Sign On Date**	**Signature**	**Sign off Date**	**Signature**
	Khanzullah	784-2003-5529170-7	9/11/26		9/11/26	
	Sher Wali	784-1976-7485941-4	〃		〃	
	Tariq	784-2001-9666756-0	〃		〃	
	Mumtaz	784-2003-4394761-8	〃		〃	
	Faaal	784-1983-0632840-9	〃		〃	
	Habib	784-1991-8635313-4	〃		〃	

AUTHORISED PERSON (AP) / COMPETENT PERSON (CP)

WITHDRAWAL: I hereby declare that all workers involved in the above-mentioned work have been withdrawn, informed that it is no longer safe to work, and that a debriefing session was held. Site normalized and safe.

Name: AHMAD **Signature:** AHMAD **Date:** 9/11/26 **Time:** 17.45

At emergency, call Police 999, Abu Dhabi TQD Control Centre 02 4165373, or Al Ain TQD Control Centre 037631413)

Daily Inspection Checklist

(FM.GN.44/ 01)

Project No D11669/E Contractor Company FALCON Date 9/4/26 Time 7:40
Weather Namal

Excavation Depth 0.75m Excavation Width 0.40m Method of Protection Sloping Soil Type ☑ A ☐ B ☐ C

Competent Person Name AHMAD Certificate Number D52497 Mobile Number 0547264330

A. GENERAL REQUIREMENTS		YES	NO	N/A
1	Any emergency rescue equipment identified in the ERP is available at site?	☑	☐	☐
2	Any surface encumbrances have been removed or supported?	☐	☐	☑
3	Adequate lighting has been provided for work during periods of darkness?	☐	☐	☑
4	Warning system utilized to warn/prevent employees from going under suspended loads?	☐	☐	☑
B. BARRICADES AND SIGNS		**YES**	**NO**	**N/A**
1	Barricades are provided to protect workers and the public coming close to the edge?	☑	☐	☐
2	Barricades and signages are provided to protect workers from traffic?	☑	☐	☐
3	Barricades facing traffic are red and white or provided with reflective strips?	☑	☐	☐
4	Where excavations impact roads the barricades comply with traffic police requirements?	☐	☐	☑
C. UTILITIES		**YES**	**NO**	**NA**
1	The exact location of utilities is clearly marked when in the vicinity of the excavation?	☑	☐	☐
2	Only hand excavation is used within the vicinity of buried utilities?	☑	☐	☐
3	Any exposed utilities are supported and protected when the excavation is open?	☑	☐	☐
4	Where OHLs are present precautions are taken to avoid contact with mobile equipment?	☐	☐	☑
5	If trench lateral travel is greater than 1.2m, is a protection system provided?	☐	☐	☑
D. TRAFFIC MANAGEMENT		**YES**	**NO**	**NA**
1	The requirements of the traffic permit are being implemented at site?	☐	☐	☑
2	Vehicles, equipment and spoil piles correctly placed to allow safe passage?	☐	☐	☑
E. WET CONDITIONS		**YES**	**NO**	**NA**
1	Surface water, or runoff, is controlled or diverted to prevent accumulation?	☐	☐	☑
2	Where there is a risk of flooding pumping facilities have been provided?	☐	☐	☑
3	Precautions are in place to avoid the contamination of water courses and drains?	☐	☐	☑
F. HAZARDOUS ATMOSPHERES		**YES**	**NO**	**NA**
1	Is there a possibility of an oxygen deficiency within the excavation?	☐	☐	☑
2	Is there a possibility of combustible or toxic gases being present within the excavation?	☐	☐	☑
3	If there is a risk of O_2 deficiency or hazardous gases, has the atmosphere been tested?	☐	☐	☑
4	Has a confined space entry permit been issued for entry into the excavation?	☐	☐	☑
5	Are the requirements of the confined space entry permit being implemented at site?	☐	☐	☑
G. MEANS OF ACCESS AND EGRESS		**YES**	**NO**	**NA**
1	Ladders, steps or ramps are provided to access excavations?	☐	☐	☑
2	Ladders are at an angle of 75^0 (4:1) and extend at least 1 m above the top landing?	☐	☐	☑
3	Ladders are secured to prevent slipping?	☐	☐	☑
4	The lateral travel to a point of egress for excavations >1.2 m deep is <7.6 m?	☐	☐	☑
H. BRIDGES AND WALKWAYS		**YES**	**NO**	**NA**
1	Bridges and walkways over excavations >1.2 m deep have guardrails and toe-boards.	☐	☐	☑
I. SPOIL PILES		**YES**	**NO**	**NA**
1	All spoil piles are at least 1 m from the edge of the excavation?	☐	☐	☑
2	The spoil pile offset is increased by 1 m for each additional 1.5 m of excavation depth?	☐	☐	☑
3	Spoil piles are sloped to prevent debris falling back into the excavations?	☐	☐	☑
J. SUPPORT SYSTEMS		**YES**	**NO**	**NA**
1	Excavations >1.2 m depth are protected by benching, sloping or a support system?	☐	☐	☑
2	The method of protection is suitable for the soil type, excavation depth and loadings?	☐	☐	☑
3	The materials and equipment used for the support system are in good condition?	☐	☐	☑

Distribution

LIMITED ACCESS PERMIT

Issue No MOS-LV-FALCON-001/2025-2026

To Mr.: Ahmed
Application No DC5373400#M38#3
LAP valid until: Date: 11/11/2026
Dept. / Section/ Company: Falcon Middle East
Issue Date: 09/11/2026
Time: 15:00

Note: The maximum validity of the permit is 30 days starting from the permit issue date.

A. ISSUE SECTION

Location: M38 #3 & plot 5
Identification of Equipment: M38-FP-025 (NP-5)
Circuit Identification LV/HV cables near excavation
Nature of the work: ☐ Working ON Equipment ☑ Working NEAR Equipment
Level of Supervision: ☑ **Direct Supervision** ☐ **Area Supervision**
Nature and Extent of work to be Done
Manual excavation for laying 4X4CX185 mm² Al cable from M38-FP-025 and backfilling as per TRA standards

The following precautions have been met:

Safe working area set, and limits of work identified	Y ☑	(Mandatory Requirement)
Pre-Work Job Hazard Analysis/ Risk assessment/ Safety plan verified	Y ☑	(Mandatory Requirement – see backside)
Work related method of statements verified	Y ☑	(Mandatory Requirement)
Safety Precautions taken at site meet the job requirements	Y ☑	(Mandatory Requirement)
EQUIPMENT UNER PTW / SFT	N ☑	(Mandatory Requirement)

LIMITS OF WORK and/or WORK AREA

① Obtain NOC/PTW/JTC prior to start the work
② Follow TRA standards
③ Proper PPE and barricades & use cable detector

The **Control Person** Giving Consent to this document (As applicable):
Name: — (CN Card # —) Mobile No.: —

I hereby declare that it is safe to work within the limits of work and/or work area detailed above.

Authorized Person/Senior Authorized Person
Name: Renju Raju (AP/SAP Card # D55355) Mobile No.: 0589720938
Signature: Renju **Date:** 09/11/2026 **Time:** 7:30

B. RECEIPT SECTION

I hereby declare that I have satisfied myself that it is safe to work within the limits of work and/or work area described above and that I have explained the precautions to achieve **Safety from the System** as well as **General Safety** to all members of the **Working Party**. I accept responsibility for carrying out and adequately **Supervising** the work above.

Competent Person/Senior Authorized Person
Name: Ahmed (CP/SAP Card # D52497) Mobile No.: 0547264338
Signature: Ahmed **Date:** 09/11/2026 **Time:** 7:30

C. CLEARANCE

I hereby declare that all men have been withdrawn and warned that it is no longer safe to work within the limits of work and/or work area detailed above and that all tools and equipment have been removed.

Competent Person/Senior Authorized Person
Name: AHMAD (CP/SAP Card # D52497) Mobile No.: 0547264338
Signature: Ahmad **Date:** 10/11/2026 **Time:** 7:00

D. CANCELLATION

The **Control Person** agreeing to the cancellation of this document (As applicable):
Name: — (CN Card # —) Mobile No.: —

Authorized Person/Senior Authorized Person
Name: Renju Raju (AP/SAP Card # D55355) Mobile No.: 0589720938
Signature: Renju **Date:** 10/11/2026 **Time:** 7:00

The Limited Access Permit Is Hereby Cancelled

ZERO HARM

Document No.	TDBL-HS-B-S-007
Addendum.	H
Type:	Form
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Excavation Permit to Work

TAQA

ISSUE SECTION (To be filled by Competent Person)

Name of CP AHMAD Section / Company FALCON Safety Document No 6029 /20 26

Application No DC5373400 (Maximo/AFW) Application Approval Date 9/11/26 Safety Document Valid Until 9/11/26

Is the work carried out under a Limited Access Permit (LAP)? Yes LAP# 001/2026 **(Attach copy of LAP to this permit)**

Cross Reference – List all the Safety Documents linked to this Excavation Safety Document

1. Type of Safety Document..... Safety Document No..... Section/ Company.....
2. Type of Safety Document..... Safety Document No..... Section/ Company.....

ISSUE SECTION (To be filled by Authorized Person)

Location Description & Nearby Structures: M38-3

Work Description

Excavation and laying of cable including backfilling.

Soil Type: A

Level of Supervision by CP: ☑ Direct Supervision ☐ Indirect Supervision

PREVENTIVE MEASURES (Completed by Authorised Person & Verified by Competent Person)
Tick the required and fill additional information.

MEASURE	Y/N or N/A	ADDITIONAL INFORMATION/ DESCRIPTION OF PREVENTIVE MEASURE
NOCs obtained	X	Please attach copy of NOCs
Warning Signs/ Labels erected	Y	Describe types of Signs, explain required labels
Road Closure certificate obtained, and roads closed	N/A	
Area Barricaded and required edge clearance maintained	Y	
Area surveyed (Scan, Radar)	Y	
Utilities provider drawings available	Y	
Trial Holes / Excavation (s)	Y	Number: 2 /Depth: 0.75m / Width: 0.40m
Services identified and marked	Y	
Overhead lines/ cables identified	N/A	
Access/ Egress provided	Y	Indicate number and types of access / egress points.
Buried utilities protected/ isolated/ re-routed	Y	If isolated, please provide shutdown request and confirmation
Spoils, material equipment set back at least 0.6m from the edge	Y	
Lighting to warn vehicle operators of excavation at night in place	N/A	
Trench support equipment designed & inspected	N/A	
Mobile equipment inspected and certified	N/A	Please attach inspection and certification
Possibility of hazardous atmosphere	N	Please provide gas test evidence
Dewatering equipment	N/A	
Daily Excavation Inspection checklist completed	Y	Attach daily inspection checklists
Other control measures	Y	Close monitoring under direct supervision

If you answer No to any of the above, give details of what remedial action you have taken to allow work to proceed.

I, **as Authorized Person**, hereby declare that all preventive measures and controls for the excavation activity have been implemented and verified with the Competent Person.

Name Saddam Certificate Number DS1070 Date 9/11/26 Time 7:45 Mobile Number ..... Signature

RECEIPT SECTION (To be filled by Competent Person)

I, as **Competent Person,** hereby declare that I have satisfied myself that it is safe to commence work and that I have jointly verified the implementation of precautions with the Authorised Person and explained the precautions to achieve **General Safety** to all members of the working party. I further accept responsibility for carrying out and adequately **Supervising** the work as detailed above. If any conditions or scope of work changes, then the work shall be stopped immediately, withdraw your team members and inform the AP.

Name AHMAD Certificate Number DS2457 Date 9/11/26 Time 7:45 Mobile Number ..... Signature

CLEARANCE SECTION (To be filled by Competent Person)

I, **as Competent Person,** hereby declare that all men have been withdrawn and warned that it is no longer safe to carry out the work that all tools and gear have been removed, leaving the work area for return to service.

Name AHMAD Certificate Number DS2457 Date 9/11/26 Time 18:20 Mobile Number ..... Signature