



# COSHH Risk Assessment No: 06

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of substance, manufacturer and safety data sheet reference.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                        | Unleaded Petrol                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Describe the activity or process<br><i>(Include how long and how often this is carried out and the quantity of substance used. A copy of a current safety data sheet (SDS) for the substance should be attached to this assessment and cross-referenced when completing it).</i>                                                                                                                                                                                                                                                                               |                                                                        | Use as a fuel                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                 |
| Specify where the activity or process is being carried out                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        | In fuel stations to refuel vehicles<br>In depot / on site to refuel plant and equipment                                                                                                                                                                                                                                                                                                                                                    |                                                                                 |
| Identify the persons at risk:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                        | Employees<br><i>(including trainees)</i> <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                               | Contractors <input checked="" type="checkbox"/> Public <input type="checkbox"/> |
| <b>Hazard(s)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Physical Nature of Hazard - SDS Section 9.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| <input checked="" type="checkbox"/> Liquid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Dust                                          | <input type="checkbox"/> Solid                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Fume                                                   |
| <input type="checkbox"/> Mist                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Vapour                                        | <input type="checkbox"/> Gas                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Other (state) _____                                    |
| Classification of Hazard - SDS Section 2.2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Moderate hazard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Acutely toxic                                                          | Corrosive                                                                                                                                                                                                                                                                                                                                                                                                                                  | Health hazard                                                                   |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>                                               | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/>                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Flammable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Oxidising                                                              | Explosive                                                                                                                                                                                                                                                                                                                                                                                                                                  | Gas under pressure                                                              |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>                                               | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> Harmful to the aquatic environment |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| <b>Risk(s)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Signal Word - SDS Section 2.2<br><b>Warning</b> <input type="checkbox"/> <b>Danger</b> <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        | Add Hazard Statement(s) - SDS Section 2.2<br>H224 - Extremely flammable liquid and vapour<br>H304 - May be fatal if swallowed and enters airways<br>H315 - Causes skin irritation<br>H336 - May cause drowsiness or dizziness<br>H340 - May cause genetic defects<br>H350 - May cause cancer<br>H361fd - Suspected of damaging fertility. Suspected of damaging the unborn child<br>H411 - Toxic to aquatic life with long lasting effects |                                                                                 |
| Route of Exposure - SDS Section 4.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| <input checked="" type="checkbox"/> Inhalation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Ingestion                          | <input checked="" type="checkbox"/> Skin Contact                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> Contact with Eyes                           |
| <input type="checkbox"/> Other (state) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Risks to Health – Most Important Symptoms and Effects - Refer to safety data sheet (attached) SDS Section 4.2<br>Harmful by inhalation. May cause lung damage if swallowed. May cause cancer. Irritating to skin.                                                                                                                                                                                                                                                                                                                                              |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Workplace Exposure Limits (WELs) please indicate n/a where not applicable - SDS Section 8.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |
| Long-term exposure level (8hrTWA):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        | Short-term exposure level (15 minutes):                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                 |
| <b>Control Measures:</b> (for example extraction, ventilation, training, supervision) - SDS Section 8.2<br>Provide adequate ventilation, including appropriate local extraction.<br>Wear light eye protection to protect from splashes. Wear protective shoes or boots.<br>In case of insufficient ventilation wear suitable respiratory equipment (BS EN 14387:2004+A1)<br>Handle in accordance with good hygiene and safety practice.<br>Avoid release to the environment. Local authorities should be advised if significant spillages cannot be contained. |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 |

| First Aid: Recommended Actions - SDS Section 4.1                                                                   |                                                                                                                                                                                            |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Inhalation:</b>                                                                                                 | Remove to fresh air and keep at rest in a position comfortable for breathing. Administer oxygen if breathing is difficult and you are trained. If symptoms develop seek medical attention. |
| <b>Ingestion:</b>                                                                                                  | Immediate medical attention is required. Wash out mouth with water and give 100 – 200 ml of water to drink. Do NOT induce vomiting. Never give anything by mouth to an unconscious person. |
| <b>Skin Contact:</b>                                                                                               | Immediate medical attention is required. Wash off immediately with soap and plenty of water while removing all contaminated clothes and shoes.                                             |
| <b>Contact with Eyes:</b>                                                                                          | Immediately flush with plenty of water. After initial flushing, remove any contact lenses and continue flushing for at least 15 minutes. Immediate medical attention is required.          |
| <b>Other:</b>                                                                                                      | n/a                                                                                                                                                                                        |
| Is health surveillance or monitoring required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                                                                                                                                                                                            |

| Personal Protective Equipment (state type and standard) - SDS Section 8.2                                            |                                           |                                                                                                                       |                                                                        |
|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
|  <input type="checkbox"/>            |                                           |  <input type="checkbox"/>            |                                                                        |
| Dust Mask                                                                                                            |                                           | Visor                                                                                                                 |                                                                        |
|  <input type="checkbox"/>            |                                           |  <input checked="" type="checkbox"/> | Safety glasses should be worn (EN 166)                                 |
| Respirator                                                                                                           |                                           | Goggles                                                                                                               |                                                                        |
|  <input checked="" type="checkbox"/> | Protective gloves should be worn (EN 374) |  <input type="checkbox"/>            |                                                                        |
| Gloves                                                                                                               |                                           | Overalls                                                                                                              |                                                                        |
|  <input checked="" type="checkbox"/> | Protective shoes or boots should be worn  |  <input checked="" type="checkbox"/> | Handle in accordance with good industrial hygiene and safety practice. |
| Footwear                                                                                                             |                                           | Other                                                                                                                 |                                                                        |

| Storage Arrangements - SDS Section 7.2                                                                                                                                                                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Keep away from sources of ignition. Keep in a dry, cool and well ventilated place. Store separately from incompatible materials.                                                                              |  |
| Disposal of residual waste and Containers - SDS Section 13.1 and guidance                                                                                                                                     |  |
| Hazardous Waste <input checked="" type="checkbox"/> Skip <input type="checkbox"/> Return to Depot <input type="checkbox"/> Return to Supplier <input type="checkbox"/> Other (state) <input type="checkbox"/> |  |
| (If Other Please State):                                                                                                                                                                                      |  |

Firefighting measures, accidental release measures, toxicological information and ecological information are provided in the safety data sheet (attached).

| Is exposure adequately controlled?                                  | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>     |
|---------------------------------------------------------------------|-------------------------------------------------------------------------|
| Risk Rating After Implementation of Control Measures (see guidance) |                                                                         |
| High <input type="checkbox"/>                                       | Medium <input type="checkbox"/> Low <input checked="" type="checkbox"/> |
| Assessed by: Michael Watson                                         | Date: 01 October 2016 Review Date: 01 October 2017                      |