# Form-13. Health & Safety Meeting Record

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| **Date:** | **\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_** | | | | **Time:** | | **\_\_\_\_:\_\_\_\_ am/pm** | | |
| **Attendance:**  **(attach additional list if required)** | | | | | | | | | |
| **Name** | | | | **Signature** | | | | | |
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| **Absent:** | | | | | | | | | |
| **Business Arising From Previous Minutes** | | | | | | | | | |
| **Review previous minutes and list actions/risk controls NOT completed** | | **Action** | | | | | | **Person Responsible** | **Time Frame** |
|  | |  | | | | | |  |  |
| **Risk Control** | | | | | | | | | |
| **Hazard Identified** | | | **Risk Control** | | | **Risk Category (High, Mod, Low)** | | **Person Responsible** | **Date Completed** |
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| **Other Discussion** | | | | | | | | | |
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