

Method Statement

Description of Task/ Activity		COLLECTION/DELIVERY OF WASTE USING VAC TANKER			
Project Name		VACUUM TANKER			
Site Location		GENERIC			
Start Date			Start Time	n/a	
Finish Date	ТВА		Finish Time	n/a	
Version	3				

	Name	Role/Trade
Personnel Involved	WOODLAND EMPLOYEE	DRIVER / OPERATIVE

Works Supervisor	SIMON MALLINSON
Role	OPERATION MANAGER
Telephone Number	



Sequence of Operations
(specifying methods of working, tools,
materials and equipment utilised)

- 1. WOODLAND TO ARRIVE ON SITE AS ARRANGED. REPORT TO SITE SUPERVISOR/CONTACT FOR SIGNING IN AND INDUCTION IF REQUIRED
- 2. IF SAFE TO DO SO, PROCEED TO WORK AREA OBSERVING SITE RULES
- 3. DON PPE PRIOR TO STARTING WORK
- 4. SECURE AREA TO BE WORKED IN/CORDEN OFF IF NEEDED
- 5. CONNECT HOSES TO TANKER, ENSURING THEY ARE FITTED CORRECTLY
- 6. OPEN ANY MANHOLE/ DRAIN COVERS IF NEEDED, OR PREPARE VALVES FOR CONNECTION
- 7. ATTACH HOSE, OR PLACE HOSE IN WASTE
- 8. ENGAGE PTO AND PROCEED TO PUMP WASTE
- 9. UNDER NO CIRCUMSTANCES LEAVE THE TANKER PUMPING UNATTENDED
- 10. ON COMPLETION, DISENGAGE PTO AND TURN OFF PUMP
- 11. REPLACE MANHOLE/DRAIN COVERS, AND SHUT OFF ANY VALVES
- 12. STOW AWAY ANY EQUIPMENT USED
- 13. CLEAN UP ANY MESS AND DISPOSE OF CORRECTLY
- 14. RETURN TO SITE SUPERVISOR/CONTACT ONCE YOU'VE FILLED IN ALL APPROPRIATE TRANSFER NOTES AND OBTAIN SIGNATURE FROM AUTHORISED PERSON LEAVING RELEVANT COPIES
- 15. SIGN OUT AND PROCEED TO NEXT DESTINATION

Key Plant and Tools Required VACUUM TANKER HOSES/FITTINGS/TOOLS



Key Materials Required	N/A						
Other Essential Equipment	WASTE TRANSFER NOTES / ANY OTHER PAPER WORK						
Specific Identified Residual Hazards (or refer to task specific risk assessments)	AS RISK ASSESSMENT						
Specific Staff Training Requirements	TRAINING AND INSTRUCTION IN USE OF VACUUM TANKER, HGV DRIVING AND ADR IF APPLICABLE						
Temporary Supports and Props needed to facilitate works	NONE						
Methods of access and egress to the work area	AS INSTRUCTED						
Fall protection measures (where work at height cannot be eliminated - consider both personnel and materials)	SECURE AREA/ TAPE OFF/ USE CONES / SAFETY HARNESS/ A-FRAME						
Hazardous Substances (attach COSHH Assessments and MSDS)		(!)	\Diamond	*	(2)		
	Very Toxic	Harmful / Irritant	Corrosive	Dangerous for the Environment	Oxidising	Highly Flammable	Explosive
Applicable	No	No	No	Yes	No	No	No
SWL's	(Detail any I equipment o place)						
	AS DESIGNI	ED					
Required Personal Protective Equipment	Safety Boots	Hard Hats	Safety Gloves			Protection	Eye Protection
Any other not stated above	1. Hi-V 2. Cov 3. 4. 5.	/iz eralls		'	1		



Emergency Procedures	CALL EMERGENCY SERVICES	
First Aid Facilities	Name of First Aider on Site	ASK ON SITE
	First Aid Box Location	IN VEHICLE CAB
	Location of Nearest Hospitals	ASK ON SITE
Other Information & Comments	REPORT ANY ACCID	ENTS INCIDENTS OR NEAR MISSES

^{*}All work will be undertaken by qualified competent persons with experience of the type of work described above, and in all cases in full accordance with safety procedures specified in the company's Health and Safety policy.

*Where a deviation from the RAMS is required then work must stop, and a revised safe system of work determined; only when approval has been given from site Health and Safety can work re-commence.

Prepared By	G MILLS
Signed	
Position	DIRECTOR
Date	05/08/19
Reviewed By	S MALLINSON
Signed	



Position	OPERATIONS MANAGER
Date	05.08.19