

Checklist

Document Name:	Coronavirus – Site and Production Checklist
Updated:	March 20202
Endorsed By:	Directors
Form Code:	CL011

Details of Worker:

Name:	Contact Phone:	Date:
TEMP READING:		TIME:
Temperature Recorded Start of Day:		
Temperature Recorded End of Day:		
Home Address:		
Worksite:		
Symptoms (please tick)		
<input type="checkbox"/> Fever <input type="checkbox"/> Sore Throat <input type="checkbox"/> Dry Cough <input type="checkbox"/> Runny Nose <input type="checkbox"/> Tiredness	<input type="checkbox"/> Headache <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Other <input type="checkbox"/> Body Ache Details:	
Date and time of fever onset:	Travel history in the past 14 days:	
<p>I have read associated documents and understand the sanitiser that RJA will be spraying both on me and on site to control the spread of COVID-19. I fully understand the risks and release and indemnify Retail Joinery Australasia Pty Ltd (RJA) and hold it harmless with respect to all liability for my death, personal injury (including allergic reaction) and all other loss or damage.</p>		
Workers Signature		
Recording Employee Name:	APPROVED TO WORK: <input type="checkbox"/> YES <input type="checkbox"/> NO	

Related Resources, Tools and Links

- PROC030 - Coronavirus Process - Site and Producton

Contact & Further Information

For further assistance please contact your direct manager.

Checklist Owner Directors – RJA