## **Special Effects Risk Assessment**

IMPORTANT
This assessment will be invalid if the relevant control measures identified below cannot be fully and properly implemented. If this is the case, the activity must be reassessed.

Location:  INTERIOR EXTERIOR  f exterior, is inclement weather a factor?  YES NO  lease continue on separate page if necessary.  Are actors or minors involved in the scene/sequence?  YES NO  f*yes*, contact the Production Safety Representative if actors or minors are involved in the scene/sequence.  s an engineering review necessary for the planned sequence?  YES NO  amples include: Use of mobile equipment such as construction cranes/RTFLs/Aerial lifts, etc. Contact your Production Safety Representative to discuss.  Describe the details of the stunt or sequence to be performed:	PRODUCTION TITLE	EPISODE/	SCENE NUMBE	R	FILMING DATE	
Time of Day  DAY SHOOT  NIGHT SHOOT  NIGHT SHOOT  Ocation:  INTERIOR  STERIOR  Fexterior, is inclement weather a factor?  YES  NO  Ves, identify which hazards are of concern due to weather.  No  No  No  No  No  No  No  No  No  N						
f exterior, is inclement weather a factor?  yes, identify which hazards are of concern due to weather.  Are actors or minors involved in the scene/sequence?  YES NO  Tyes', contact the Production Safety Representative if actors or minors are involved in the scene/sequence.  s an engineering review necessary for the planned sequence?  YES NO  amples include Use of mobile equipment such as construction cranes/RTFLs/Aerial lifts, etc. Contact your Production Safety Representative to discuss.  Describe the details of the stunt or sequence to be performed:  Flame Bars Pyrotechnics Car Flipper Pod/Gimbal Atmoshperic Effects (Dust, Smoke, Fog)  Crane/Telehandler Other	SPFX COORDINA	ATOR	S	STUNT COORDINAT	FOR (if applicable)	
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(Dust, Smoke, Fog)  Crane/ Telenander  Other	Describe the details of the stunt or se	equence to be per	formed:			
Upload any Pre-Viz, Storyboards, images or stunt diagrams. Click on the boxes below to select a file.	Flame Bars Pyrotechnics	Car Flipper Poo			Crane/Telehandler	Other

Hazards: Identify all hazards and who is at risk.	Control Measures: Measures to mitigate haza	ards.					
Permit/s Required for planned effect or sequ	Jence:	<u> </u>					
Risk Level Before Controls H M	L	Residual Risk Level	H M	L			
Emergency Response							
First Aid Attendant/Medic	First Aid Attendant/Medic EMT/Amb		Other				
Fire Protection							
N/A	Fire Extinguishers	Туре:					
Fire Protection Specialists eg. Fire Safety Officer/ Fire Department or Brigade		Other (Please specify: e.g. extrication, etc.)					
Risk Assessment distributed to:							
Name	Position Producer		Contact Number				
Name Name	Position Production Manager Position		Contact Number  Contact Number				
Name		ety Representative	Contact Number				
SPFX Coordinator:							
Signed:							
Date:	-						