

PROJECT LOG

Dates: from sunday _____ to saturday _____

Location* _____

Team Leader _____ Team _____

Car Registration _____ Fuel Card No. _____

Mileage on Sunday _____ Km.

Team Members _____

*Specify the locations (i.e Djúpalónssandur, Malariff...)



Umhverfisstofnun
Environment Agency of Iceland



Check list:

Car:

Lights _____

Oil _____

Tyre pressure _____

Fuel _____

Screen washer _____

Cleaning inside _____

Cleaning outside _____

Other:

Collect the receipts (food, fuel, etc.) _____

Brief Project Description

(Very brief summary – e.g. ‘Trailwork, wooden steps to viewpoint, way-marking ‘, or ‘General maintenance including painting hut, way-marking’

Daily Task Summary (in the following boxes, try to estimate the time you have been working (1/2 day, 1 day...) Note that landscaping is closing path... not landscaping while doing steps 😊)

	Date	No. Of Vols	Stone steps	Wooden steps / boardwalk	Way marking	Drains	Removing invasive plants	Raking off-road tracks	Landscaping (closing unwanted path...)	Other (picking up trash, cairn restoration...)	Trip and activities
Mon											
Tue											
Wed											
Thur											
Fri											
Sat											
Sun											

Feedback and Comments

	E	G	F	B	Comments (if any)
Safety					Did anything make difficulties? Is there anything we should know in the future?
Equipment					Did you have all you need? Anything we might add or remove to make it better next time?
Mess tent					Tell if some parts of the tent are broken/need to be repaired (due to weather conditions)
Tools					Did you have all you need? Anything we might add or remove to make it better next time? Tell if a tool is broken/needs to be repaired
Food					Anything important not provided/not enough of? Any suggestions for adding to or removing from the stock?
Transport					Was the transfer between locations difficult? Was the vehicle proper to the location?

E: Excellent – G: Good – F: Fair – B: Bad

Further comments if you wish. Comments might be on Ranger co-operation, 'Team Spirit', Leisure activities or anything else you might think helpful.

Risk Assessment for Trail Work (amend and complete)

Site name: _____

Hazard or hazardous events: (Health hazards and physical hazards)	Typical uncontrolled outcome:	UST control measure	Who is at risk?
Manual handling Stone splinters Slips, trips and falls Contact with swinging hand tools Contact with micro organisms Public access to work site Others (please specify):	Back strains Eye injury Minor scrapes/bruises Injury to self/others Stomach complaints Accidents/incidents Others (please specify):	Demonstrate safe technique Wear safety goggles Demonstrate safe technique Demonstrate safe technique Wash hands before eating Divert with signs Others (please specify):	<p>PPE Required:</p> <p>Work gloves _____</p> <p>Safety boots _____</p> <p>Goggles _____</p> <p>Hard hat _____</p> <p>Ear defenders _____</p>

Completed by: _____

Signed: _____

Assessment date: _____