

# Safe Work Practice (SWP)

# Name of Task

## **Metal Bender**

### Department/Unit: Trades Programs, Maintenance

**Personal Protective Equipment or other required equipment and safety considerations**: Eye protection, and CSA approved footwear. Long hair must be tied back or contained. No loose fitting clothing, or jewelry (watches, rings or necklaces).

**Hazards:** Cuts, lacerations, amputations, and musculoskeletal injury.

## **Required Training:**

- Successful completion of safety unit and test.
- Training in-house by individuals, experienced and knowledgeable with the tool.
- Read and understand General Safety SWP.

### Steps to be taken to complete task safely:

- 1 Pre-Operational Safety Checks:
  - Ensure no slip/trip hazards are present in workspace and walkways.
  - Faulty equipment must not be used. Immediately report suspect equipment.
- 2 **Prohibited Activities:** 
  - Do not bend heavier material than rated capacity, even in shorter lengths.
  - Do not force-clap material that is too large for the machine and do not bend rods.
- 3 Wear specified Personal Protective Equipment.
- 4 Adjust clamping bar for correct length of fold.
- 5 Position work piece for fold; secure work piece.
- 6 Fold only one thickness of material in one operation.
- 7 Grasp bending wing levers with both hands and pull up to desired angle.
- 8 Return bending wing lever to starting position and remove work piece.
- 9 **Post-Operational Safety Checks:** 
  - Clean up work area.

If an emergency situation occurs while conducting this task, or there is an equipment malfunction, shut the equipment off immediately and follow the lock out procedure. Report any hazardous situation to your instructor/supervisor immediately.

#### **Responsibilities, Completion and Review**

Management and workers to ensure all duties performed in accordance to training, established health and safety regulations/guidelines, policies and procedures (e.g. utilizing personal, protective equipment as per SAFE Work Procedures). Notify Manager or designates (i.e. supervisors) of all occurrences, injuries illnesses or safety and health concerns which are likely to harm themselves, co-workers, or any others who enter the premises.

Completed by and Date:	Approved by:
Last Reviewed/Revised by and Date:	<b>Note:</b> This task will be monitored periodically to ensure
	compliance and effectiveness.

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