

Noise Assessment Record

MOD Form 5017

NOTE: To be completed by 'competent' persons with current knowledge of conducting noise assessments. This form is not suitable for assessing impulse noise from military weapons, explosives and pyrotechnics which should be assessed by a specialist with a bespoke risk assessment.

1. Assessment details							
Establishment / Unit / Platform:				Section / Department / Sub-unit:			
Location of assessment (address)						Type of noise environment	
						Continuous <input type="checkbox"/>	
						Impulsive <input type="checkbox"/>	
MOD Form 5017 Reference No.				Main risk assessment (MOD Form 5010) Reference No.			
2. Assessment carried out by							
Assessor name:				Signature: (only if form is completed by hand)			
Post / Role:				Rank / Grade:		Date:	
3. Summary of results (complete after sections 4 – 10)							
Post / Role Title	Number of personnel exposed	Lower Exposure Action Value reached?		Upper Exposure Action Value reached?		Exposure Limit Value reached? (Hearing protection accounted for)	
		L _{EP,d} 80 dB(A)	L _{Cpeak} 135 dB(C)	L _{EP,d} 85 dB(A)	L _{Cpeak} 137 dB(C)	L _{EP,d} 87 dB(A)	L _{Cpeak} 140 dB(C)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is a specialist noise assessment or advice required due to presence of impulse noise or Exposure Limit Values exceeded with mitigation? (L_{EP,d} over 100 dB(A)) Yes ☐ No ☐

Measurement details

4. Measurement equipment					
Sound level meter		Serial No.		Date of calibration	
Microphone		Serial No.		Date of calibration	
Calibrator model		Serial No.		Date of calibration	

5. Description / sketch / images of area covered by the assessment

(Identify locations of noise sources, normal working positions, etc)

6. Details of operations / remarks

(Detail the work / activities undertaken, and any control measures currently in place)

Measurement results							Hearing Protection	
Start calibration level (dB)		End calibration check (dB)					Make / model:	
Activity (as specified in section 6)	Measurement				Activity Noise Exposure		In use currently?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Duration	L _{Aeq} dB(A)	L _{Ceq} dB(C)	L _{Cpeak} dB(C)	Activity Duration	Exposure Points	SNR:	
							L' _{Aeq} at the ear (L _{Ceq} - SNR + 4) dB(A)	Exposure Points at the ear
					Total points		Total points	
					L _{EP,d} no hearing protection		L _{EP,d} with hearing protection	

7. Recommendations
Actions necessary to comply with JSP 375 Volume 1, Chapter 25 - Noise at work
Reduction of noise exposure by means other than the provision of hearing protection (Essential if personnel are exposed at or above the Upper Exposure Action Value)
Information, Instruction, and Training of personnel (Essential if personnel are exposed at or above the Lower Exposure Action Value)
Hearing Protection Zones (Essential in all areas where personnel are exposed at or above the Upper Exposure Action Value)
Provision of personal hearing protection (Where applicable, is the current hearing protection suitable and sufficient, or is additional / alternative hearing protection required? Include types and NATO Stock numbers, where possible)

8. Additional recommendations

(List any further actions which have not been previously discussed)

9. Further comments

10. Action taken by commander, manager or accountable person

Name:		Signature (only if form is completed by hand)			
Post / Role:		Rank / Grade:		Date:	

11. Record of reviews

Note: A review should be undertaken at a frequency that is appropriate to the level of risk (see JSP 375 Chapter 25 for details) but must be conducted at least annually or if there is a change in work practices, equipment or personnel.

Date of initial assessment		Reference No. of initial assessment	
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Date of review	Name of reviewer	Grade / Rank	Re-assess?
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

If a re-assessment is required, please fill in a new Noise Assessment Record and enter the details below.

Reference No. of new assessment		Date of new assessment	
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Duration of exposure											Daily noise exposure $L_{EP,d}$ (dB(A))
	2 min	5 min	15 min	30 min	1 hr	2 hr	4 hr	8 hr	10 hr	12 hr	
120	1300										320000
110	130	330	1000	2000							32000
105	42	105	315	625	1250						10000
100	13	34	100	200	395	790	1600				3200
98	8	22	60	125	250	500	1000	2000			2000
97	7	17	50	100	200	395	790	1600	2000		1600
95	4	10	32	65	125	250	500	1000	1250	1500	1000
94		8	26	50	100	200	395	790	1000	1200	790
93		7	20	40	80	160	315	630	790	950	630
92		5	16	32	65	125	250	500	625	750	500
91		4	12	26	50	100	200	400	500	595	400
90			10	20	40	80	160	315	395	475	315
89			8	16	32	65	125	250	315	375	250
88			6	12	26	50	100	200	250	300	200
87			5	10	20	40	80	160	200	240	160
86			4	8	16	32	65	125	155	190	125
85				6	13	26	50	100	125	150	100
84				5	10	20	40	80	100	120	80
83				4	8	16	32	65	80	95	65
82					6	13	26	50	65	75	50
81					5	10	20	40	50	60	40
80					4	8	16	32	40	48	32
79						6	13	26	32	38	26
78						5	10	20	26	30	20
76							5	10	13	15	10

Table 1 – HSE - Noise exposure ready-reckoner (daily exposure)

	Above upper exposure action value ($L_{EP,d}$ 85 dB(A))
	Above lower exposure action value ($L_{EP,d}$ 80 dB(A))
	Below lower exposure action value ($L_{EP,d}$ 80 dB(A))