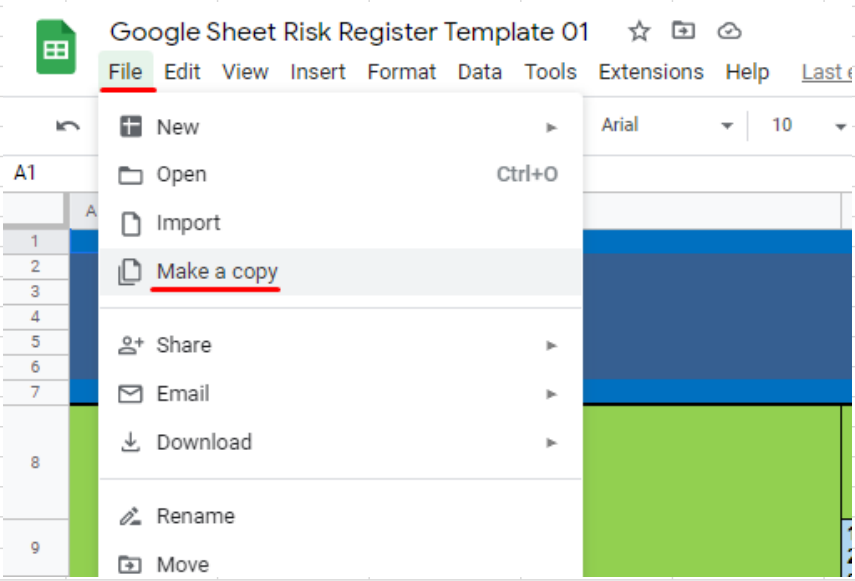
No.	Risk Title	Risk Description	Risk Owner	Risk Category	Probability of Risk Occurring H, M, L	Performance Impact H, M, L or N	Timescale Impact H, M, L or N	Cost Impact H, M, L or N	Cost Impact Estimate ($)	Cost Impact Rationale	Factored Cost ($)	Risk Mitigation Actions	Is Mitigation Costed in a Work Package?	Risk Trigger Events / Dates	Risk Retirement Date	Contingency Plan	Secondary Risks	Risk Score	Severity L, M or H	Risk Status	Stake-holders	Internal/ External risk	Comments	Risk Title	No.	Tp	It	Ic	Prob
Unique Serial No.	Brief name of risk	Describe the risk	Person responsible for managing the risk.	e.g. Technical, Commercial, Management	Any initial value should be updated to reflect the impact **AFTER** undertaking RISK MITIGATION measures.	Any initial value should be updated to reflect the impact **AFTER** undertaking RISK MITIGATION measures.	Any initial value should be updated to reflect the impact **AFTER** undertaking RISK MITIGATION measures.	Any initial value should be updated to reflect the impact **AFTER** undertaking RISK MITIGATION measures.	Cost of risk occurring and cost of implementing fallback plan.	Rationale for the cost impact estimate. How is the cost built up?	Probability times Cost Impact	Actions/activities to be undertaken to reduce or eliminate the chance of the risk impacting.	Are risk mitigation activities called within work packages? **Yes / No / Partly**	Key points when data evaluation to determine contingency/fallback or secondary should be executed	Date by which risk will have either happened or ceased to be a threat.	Plan of what to do if the risk actually occurs.	Risk. Secondary risks only happen as a result of a primary risk occurring.	Risk Score is calculated using (Probability) and Impacts	From comparison of Risk Score with Severity Threshold	Current status **Planned In Work Active Closed**	Identify key stakeholders.	Internal (to company) or External (to company with customer)	Current status of risk and results from actions taken to manage the risk.	Brief name of risk (repeat)	Unique Serial No. (repeat)				
1																		0	-1						1	0.00	0.00	0.00	0.00
2																		0	-1						2	0.00	0.00	0.00	0.00
3																		0	-1						3	0.00	0.00	0.00	0.00
4																		0	-1						4	0.00	0.00	0.00	0.00
5																		0	-1						5	0.00	0.00	0.00	0.00
6																		0	-1						6	0.00	0.00	0.00	0.00
7																		0	-1						7	0.00	0.00	0.00	0.00
8																		0	-1						8	0.00	0.00	0.00	0.00
9																		0	-1						9	0.00	0.00	0.00	0.00
10																		0	-1						10	0.00	0.00	0.00	0.00
11																		0	-1						11	0.00	0.00	0.00	0.00

0.0	Sum of Cost Impact Estimates
0.0	Sum of Factored Cost Impact

INSTRUCTIONS ON HOW TO COPY THIS TEMPLATE

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