

Permit number _____

PART A: WORK REQUEST

Contact name: _____

Phone number: _____

Company name: _____

Location of work (building/room): _____

Summary of work to be done: _____

PART B: SAFETY PROCEDURES: To be implemented before work commences

1. The following processes/routes are to be suspended/ altered during the course of the work

2. The following equipment/ area is to be withdrawn from service during the course of the work

3. All users have been made aware of this suspension/withdrawal Yes / No

4. Safety warning notices have been posted where required Yes / No

GENERAL PERMIT TO WORK



5. The following steps have been taken to eliminate, control or contain hazards in the area:

6. The following safety measures are recommended, including additional COVID-19 related preventative measures :

Office Use

Have all the following been checked and confirmed?

- SWMS/ JSA
- Contractor registration
- All contractors undertaking work have been inducted
- Workcover insurance in date
- Professional Indemnity insurance in date
- Public Liability insurance in date
- COVID-19 Declaration signed

GENERAL PERMIT TO WORK



PART D: COMPLETION OF WORK

To be completed by contractor

I confirm that the work has been completed in accordance with this permit. Services have been restored and the work area is ready for re-occupation.

Signed

Date

Time

PART E: REINSTATEMENT OF WORK AREA

To be completed by Facilities

I confirm that all equipment has been returned to service, work site inspected and confirmed free from hazards, safety signs have been removed and the users informed that work may resume in this area.

Signed

Date

Time