

HOT WORKS PERMIT

Contract Name:		Contract No:
Document Ref. No.:		
Task or work operation:	Duration of permit:	
This Permit to work is issued for the following carried out:	work. No work other	than that detailed must be
Is work to be carried out when plant, equipme	ent or systems are in (operation?
Location of work:		
Description of work:		
Method of isolation/making safe:		
Precautions		
 Ensure hot work equipment is suitable for the check location and means of raising alarm 	use and in good order	
Ensure location extinguishers/hose reelsInspect nearby areas		
 Remove any combustible material from wo Remove any flammable liquid containers fr 		full or empty)
 Provide suitable and adequate protections against sparks and hot particles Follow-up inspection (1 hours ***Minutes*** mins later) 		
Tollow-up inspection (1 hours *** Minutes*	mins rater)	
Extra precautions to be taken if plant, machin • Work to cease 1 hour before vacation of sit		operation:
A Fire extinguisher to be carried by each or		i a mak anukaina)
Liaison with tenants required re-removal of	·	i.e. net curtains)
All appropriate PPE must be worn at all times Authorisation		
Name of person issuing Permit:		
Position of person issuing Permit:		

Form	DOCUMENT:	Issue:	Date:
F07	Hot Works Permit	1.0	MARCH 2018



Project:		Date:	Time:		
Section 1	Commencement		To be completed by Supervisor directly esponsible for the works to be undertaken		
Detailed description	of the works:				
	gs showing location, type and status (ie, live or dead) area of the dig been reviewed?	of all Yes	No No		
	ion of the dig area been carried out & Is a cable loc to sweep the area and establish the service location?	ating Yes	No No		
Has a method statem Contractor for comm	nent for the proposed works been submitted to the Princent / approval?	cipal Yes	No No		
	equate trench support materials available on site & in this excavation operation (i.e. stepped or battered sides		No		
	perienced and fully conversant with the principles of funderground services and the site ground conditions.	safe Yes	No		
Are operatives conve of method statement	ersant with safe digging / heading practices? (ie. Explanetc)	ation Yes	No No		
	ant to be used in good order with current inspection reg gh examination certificates available for inspection.	ister Yes	No		
	dings only - Is all necessary: PPE / Rescue equipment / tilation availble for use (delete as applicable)	Gas Yes	No [
Other precautions (if	· · · · · · · · · · · · · · · · · · ·				
	Sign: D Control	ate:			
			stem check by Site Management		
	cautions identified above are satisfactory for the works				
Digging may proceed Digging may not proceed	Further action	required: (spec	лу)		
			_		
	Sign:D				
Section 3	Completion		All permits must be signed upon completion by Works Supervisor for cancellation		
I am satisfied that the wor	k area has been left in a safe condition and therefore th	is permit is her	reby cancelled.		
Name:	Sign: De	ite:	Time:		
Section 4	Close out or Cancellation		All permits must be closed out and finally cancelled by Site Management		
	work to which this permit relates is now complete. All men, i.e., physical/visible edge protection, warning notices,				
Name:	Sign: Da	ite:	Time:		

FI5 - Permit to Dig Version: VI

Date: 01/03/18



PERMIT TO STRIKE TEMPORARY WORKS

Contract	Contract	
No:	Name:	
Temporary Work	s Item:	
Specified minimu	ım concrete streng	th:
sufficient strength t	o support the applied	above item of temporary works has gained loads. Permission is hereby given to strip the design specification where applicable.
Name:	Signed: Co-ordinator	Date:
Name:		Date:
Verifying Docume	nts:	
Cube reference N	lumbers	Compressive Strength Achieved

Form	DOCUMENT:	Issue:	Date:
F14	Permit to Strike	1.0	01/03/18



PERMISSION TO LOAD

Contract	Contract	
No:	Name:	
Falseworks Item	 1:	
T! 6 !	to the state of th	
		en installed as per the specified falsework in accordance with the
_	n where applicable.	alsework in accordance with the
Name:	Signed:	Date:
Temporary Work	s Co-ordinator	
Name:	Signed:	Date:
Principal Contrac	tor	
Documents/Drav	vings/Method Statements	<u>/Risk Assessments:</u>
Name		Reference:
Name		Reference:

DOCUMENT SMS/FRM05	ISSUE	PAGE
Permission to load	01	1 of 1