

| Authorised By: New Name of Pages 2 New Name of Pages 2 New Name of Pages 3 New Name of Name o | Title: Permit to Work – Work at Heights Permit | | | | | | No: | | |
|--|--|-----------------------------|-----------------|---------|---|--------------------|-----------|----------------------------|--|
| Parent Number: Date: | | | | | | | | Authorised By: | |
| Size Contact | | | | | | Number of Pages: 2 | | | |
| Contractories Properties and detune. This permit is valid offen: Separation of the permit with Education of this permit must be combined and signed by the authorized personal or soft and is under the two keeps and the permit with the contract and signed by the authorized personal or soft and is under the two keeps and the permit with the contract and signed by the authorized personal or soft and is under the two keeps and the permit with the contract and signed by the authorized personal or soft and is provided and in the work permit. Ves. No. No | Permit Number: | | | | Date: | | | | |
| Part | | | | | | | | | |
| This permit is valid from: Part | | | | | Dhanai | | | | |
| The permit is world units | | | | | | | | | |
| Description of works: A Sele Work Method Statement (SWMS), Job Safety Analysis USA) and/or Safe Work Procedure (SWP) has been provided and is attached to this work parmit. Yes No No No No No No No N | | | | | <u>.</u> | | | | |
| Note: The following section of this permit must be complicted and signed by the authorized person(s) before work is to proceed and only work listed above may be completed. The following equipment will be used during the works (all exquerent to be used is in pood working order and is lift to use): | | | | | | | | | |
| The following equorment will be used during the works (all equorment to be used is in good working order and is fit for use): Clear Clear | Note: The following s | | | | | | | | |
| Cancel action completed mode platform (i.e.) Roof and/or ladder anchor points Roofs and humans a cassor if if it colored in a cassor if if it colored Roofs and humans a cassor if it it colored Roofs and humans a cassor if it is platform Roo | - | ont will be used during the | works (all oa | iinma | ant to be used is in good working order | and ic | fit for u | 20): | |
| Selepation Sel | _ | | (i.e. | | | | | | |
| Cher (please specify): The following services have been isolated for the duration of the works: Snoke if themal detectors Pipes, tanks and valves Electrical Outlets / appliances Other (please specify): The following control measures have been implemented for the duration of the works: Cher (please specify): The following control measures have been implemented for the duration of the works: Cher (please specify): The following control measures have been implemented for the duration of the works: Cher (please specify): The following control measures have been assessed and are suitable for the works: Cher (please specify): This permit should be prominently displayed at the work site Authorisation Permit Issued To: (Pint name) (Signature) (Date) Cancellation/completor of permit (Pint name) (Signature) (Date) Cancellation/completor of permit Reason for cancellation: Final Sign Off The worksite has been inspected by me at the cancellation/completion of the work at heights and declared safe for normal operations to resume. | | | (| Ш | Roof and/or ladder anchor points | | Rope | s and harness | |
| Other (please specify): The following cervices have been isolated for the duration of the works: Snoke / Internal detectors | | | | | Extension ladder | | | | |
| The following services have been isolated for the duration of the works: Sincke / thornal detectors Pipes, tunks and valves Electrical Ouffets / appliances | | | | | Appropriate footwear | | Safet | y net | |
| Cher (please specify): The following control measures have been implemented for the duration of the works: Barricades Barricades Barricades Barricades Cher (please specify): The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environmental factors have been assessed and are suitable for the works: The following environ | Other (please specify) | - | | | | | | | |
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| The following control measures have been implemented for the duration of the works: Barricades | | | | _ | | | Elect | rical Outlets / appliances | |
| Barricades Signage Spotter | Other (please specify) | : | | | | | | | |
| Barricades Signage Spotter | | *** | | | | | | | |
| Barricades Signage Spotter | | | | | | | | | |
| Other (please specify): The following environmental factors have been assessed and are suitable for the works: Weather / wind Stored material / vegetation Other (please specify): This permit should be prominently displayed at the work site Authorisation Permit Issued To: (Print name) (Signature) (Date) Permit Issued By: (Print name) (Signature) (Date) Cancellation/completion of permit Permit cancelled/returned by: (Print name) (Signature) (Signature) Cancelled/returned at: ann/pm On: Reason for cancellation: Final Sign Off The worksite has been inspected by me at the cancellation/completion of the work at heights and declared safe for normal operations to resume. | The following control r | measures have been imple | emented for th | e du | ation of the works: | | | | |
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| | (Prin | к пате) | | | (əignature) | | | (Date) | |



| | Safe Work | Method Statement Form | | | | | |
|--|-----------|-----------------------|----------------------|-----------|--|--|--|
| Activity Description | | | | | | | |
| Project Location | | Date : | | | | | |
| Project Manager | | Time : | | | | | |
| Company | / Details | | Principal Contractor | | | | |
| Company Name | | Principal Contractor | | | | | |
| Contact Person | | Contact Person | | | | | |
| Address | | Address | | | | | |
| Phone Number | | Phone Number | | | | | |
| Responsibilities | | Name | Position | Signature | | | |
| Person responsibly to ensure compliance with OHS | | | | | | | |
| requirements and building co | de | | | | | | |
| Number of worker on site | | | | | | | |
| Details of Subcontractors | | Name of Contractor | | | | | |
| | | Contact Person | | | | | |
| | | Number of | | | | | |
| | | employees | | | | | |
| | | Duration of work | | | | | |

| High Risk Construction work | PPE Required | PPE Required | | |
|--|--|---|--|--|
| Place tick (if required) or x ((if not)required) | Place tick (if required) or x (if not requ | Place tick (if required) or x (if not required) | | |
| Risk of person falling from more than 1.8 meters | Full body Harness | | | |
| Likely to involve disturbing asbestos | Helmet | | | |
| Work on or near the chemical , fuel or refrigerant lines | Safety shoes | | | |
| Work on areas with artificial extremes of temperature | Eye Glass | | | |
| Use of explosives | Reflector vest | | | |
| All electrical cables are safe and not exposed to risk | Others specify | | | |

Risk Rating = Likelihood x Severity

| | s | Catastrophic | 5 | 5 | 10 | 15 | | 25 |
|--------------|--------|----------------------|------------|------------|--------|------------|----------|----------|
| | e v | Significant | 4 | 4 | 8 | 12 | | 20 |
| | e r | Moderate | 3 | 3 | 6 | 9 | 12 | 15 |
| | i t | Low | 2 | 2 | 4 | 6 | 8 | 10 |
| | У | Negligible | 1 | 1 | 2 | 3 | 4 | 5 |
| Catastrophic | | STOP | | 1 | 2 | 3 | 4 | 5 |
| Unacceptable | | URGENTACTION | | Improbable | Remote | Occasional | Probable | Frequent |
| Undesirable | | ACTION | | | | | | |
| Acceptable | | MONITOR | Likelihood | | | | l) | |
| Desirable | | NO ACTION EIREMITOOD | | | | | | |

| onments | |
|---------|---|
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