Permit to Work

MAERSK

The permit must be available at the work site and returned to the authorised site representative on completion of work for sign off and filing. Please print clearly in BLOCK CAPITALS.

Date:	

Application for a Permit			
Company:		WON/PO:	
Contact Name:			
Location working on Site:		Site name:	
Contact Tel No:			
Name of all operatives on site:			
Description of work:			
Equipment to be used:			

Contractor to complete the following for all work:	Yes	No
I have read and understood the fire evacuation process for this building including assembly point and how to raise the alarm		
I confirm that I and my team are trained and competent for the work I am to undertake		

Contractor to complete the following for all working at height or roof work:	Yes	No
I will ensure that there is safe access and egress before commencing the work		
I have checked roof plans / risk assessments for fragile surfaces / edge protection and other existing hazards (roof work only)		
I have confirmed that the weather conditions are suitable for the work I am to undertake (outside work only)		
I have a suitable rescue plan in place that is trained and understood by all working in my team, this will be amended to suit the needs of the site before works commence		
I am familiar and competent to use the roof access equipment ie lanyard and all statutory inspections are in date		
I confirm that suitable barriers will be erected to ensure that nothing can fall onto people / property below the working area		

Contractor to complete the following for confined spaces:	Yes	No
I can confirm that checks will be made prior to entry for fumes / flammable atmosphere / gas		
I confirm that people attending this job are trained in rescue from confined spaces and before the job commences a rescue plan will be in place		
I have a suitable means of communication for those in the confined space		

Contractor to complete the following for work on PFS:	Yes	No
I confirm that suitable tools are to be used that are intrinsically safe whilst working in this area		
I confirm all operatives hold an in date SPA passport		
I confirm I am aware of the emergency procedures in the PFS		

Contractor to complete the following for all electrical work:	Yes	No
I confirm that all apparatus in the area specified is dead, isolated from all live conductors and is connected to earth		
I have posted warning notices as applicable. State where		
I confirm that I understand the Maersk Electrical Safety Procedures and I will follow them whilst working		
I confirm I have fitted safety locks. State where		

Contractor to complete the following for all hot works:	Yes	No
I confirm that the work area will be adequately ventilated		
I have or will make arrangements for the smoke detectors to be isolated in the work area and Impairment Procedures followed and will return them to full service after the works have ceased		
I will have a minimum of 2 fire extinguishers available in the working area and I am trained in their use		
I will complete a mandatory fire watch for 60 mins post works		
I will ensure that all surrounding areas are clear from rubbish, have been swept clean and are free from combustible materials and or are wetted down as appropriate		
I have confirmed that all stock, plant and machinery within 10m (including underneath any mezz levels) will be protected from heat and sparks with non-combustible curtains, metal guards or flame proof covers		
I will ensure that warning notices have been posted as applicable		

Contractor to complete the following for all excavations:	Yes	No
I confirm that prior to work commencing physical checks will be made for underground services		
I confirm that I will make provision to prevent people and equipment from falling into any hole / trench and that the area will be securely fenced off		
I confirm I will make suitable provision to prevent any trench from collapsing		

Contractor to complete the following for all pressure system work:	Yes	No
I confirm the system is, or will be isolated from all connected pipework		
I confirm that the system has or will be purged with air		
I confirm that the system will be electrically isolated and locked off		
I confirm that the system will be mechanically isolated and locked off to prevent re energisation		

Additional Hazards Identified with Control Measures Implemented:

Hazards Identified	Control Measures	Responsibility

Overall Risk Rating*: High / Medium / Low *refer to risk matrix

Signed Contractor:	

Authorisation by Maersk						
The above work is authorised to proceed on the provision that the procedures above are maintained for the duration of the work and therefore issue any keys or access to required areas.						
Signed:		Print:		Time:		am/ pm

Works Completed and Areas Safe						
The work area has been inspected, is clean and tidy, and can be signed back into general use. Any keys issued have been returned.						
Contractor signed:		Print:		Time:		am/ pm
Contractor to confirm all hot works have ceased and a fire watch commenced at:				Time:		am/ pm
Maersk signed:		Print:		Time:		am/ pm

Date:	