

10.2.WH.I.RC.Permit - Confined Space Entry March 2018

Contractor	Part 1 – Contractor's onsite responsible person for Confined Space Entry work is to complete this part of the permit		
Site Name:		Site Address:	Permit #
Contractor:		Contact Phone No:	
Company/Business Name performing the Confined Space Entry works (" the Contractor "):			
Location/Zone/Area/Description of Confined Space:			
Description of work to be carried out:			
Confined Space Entrants: 1. Name: _____ Signature: _____ 2. Name: _____ Signature: _____ 3. Name: _____ Signature: _____			
Confined Space Training Certificate/s viewed for all entrants above: <input type="checkbox"/>			
Stand By Personnel/Attendants: 4. Name: _____ Signature: _____ 5. Name: _____ Signature: _____ 1. Name: _____ Signature: _____			
Communication arrangements:			
SWMS along with task and site specific Risk Assessment complete with emergency preparedness and response management plan has been provided to the Facilities Manager. (Work cannot commence without these documents) <input type="checkbox"/> Workers have provided confined space entry training certificate <input type="checkbox"/> <i>I certify that rescue and emergency procedures are understood by all staff undertaking the work</i> <input type="checkbox"/> Name: _____ Signature: _____			
Date permit is valid for:		Permit Time In/Out:	# of workers:
Isolation (The items ticked have been isolated or made safe) <input type="checkbox"/> Pipelines (water, steam, gas, etc) <input type="checkbox"/> Electrical Services <input type="checkbox"/> Mechanical/electrical drives <input type="checkbox"/> Sludge/Deposits/Waste		Safety (Purging and ventilation measures listed have been implemented) <input type="checkbox"/> Purging – Flush and Vent <input type="checkbox"/> Ventilation <input type="checkbox"/> Secure Area <input type="checkbox"/> Continuous Ventilation of Space Required	

<input type="checkbox"/> Radiation Services <input type="checkbox"/> Harmful materials <input type="checkbox"/> Warning notices, lockout devices or <input type="checkbox"/> Harmful materials tags have been fixed at isolation point	<input type="checkbox"/> Other (Please Specify)
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[illegible]

Hot Work	
<input type="checkbox"/> Area clean and free of all readily combustible material within 15 metres <input type="checkbox"/> All drains within 15 metres are covered with wet fireproof blanket <input type="checkbox"/> All sparks from work more than 2 metres above ground are contained completely by a suitable enclosure <input type="checkbox"/> Welding/gas cylinders (not with 8 metres of any drain) <input type="checkbox"/> A water hose run to job facility and tested/left on	<input type="checkbox"/> Welding machine earthed directly to equipment being welded as close to welding point as possible <input type="checkbox"/> Power leads not draped across pipes or access ways <input type="checkbox"/> Electrical trace on pipes isolated, hot work is/is not permissible inside the space <input type="checkbox"/> Need for a fire watcher

Permit Approval

I certify all documents have been reviewed and tests carried out by: _____
 Contractor Name (responsible person)

Brookfield	Part 2 – Permit Authorisation
<p>All documentation has been received by the Brookfield Facilities Manager and all above actions have been completed prior to confined space entry and authorisation of this permit e.g. evidence of training, SWMS and risk assessments etc. have been received and reviewed.</p> <p>Entry to confined space areas is permitted by: _____ Brookfield Facilities Manager</p>	

Contractor	Part 3 – Permit Completion	
Staff Sign In / Sign Out		
1. Sign In	1. Sign Out	
2.	2.	
3.	3.	
4.	4.	
Competent Person to confirm signing out of contractor staff: (Sign)		
Permit reviewed by:	(Brookfield Staff)	Date / Time

This section to be completed and the permit returned on the completion of the works conducted			
Work was completed:	Time/Date	Work site checked:	Time/Date
I certify that the area where the work was conducted is now safe and able to resume normal operation			
Name of competent person		Signature	

SWMS along with Management Plans (complete with emergency management and contingency planning) must be provided to the Facilities Manager prior to meeting approval for the permit.