Penetrations and Excavations Permit HS-FR-10-05

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|  |  |  |  |  |
| Centre/Location: |       | Date: |       |  |
|  |  |  |  |  |
| Company Name: |       |  |
|  |  |  |
| Permit Receiver: |       | Contact Phone: |       |  |
|  |  |  |  |  |
| Description of Work: |       |  |
|  |  |  |
| Location of Work |       |  |
|  |  |  |
| Permit Issuer Name: |       | Vicinity Centres Position: |       |  |
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| General Requirements |
| Appropriate SWMS or risk assessment in place | [ ]  | Yes |  |  |
| Work area is adequately barricaded to control access & egress | [ ]  | Yes |  |  |
| Demonstrated appropriate competency for operation of plant or equipment | [ ]  | Yes |  |  |
| Adequate ventilation (natural or mechanical) is provided to work area | [ ]  | Yes |  |  |
| Adequate lighting (natural or artificial) is provided at the work area | [ ]  | Yes |  |  |
| The hazardous materials register has been reviewed & appropriate controls implemented | [ ]  | Yes | [ ]  | N/A |

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| Identification of Services |
| Civil or Geotechnical Engineer’s report undertaken/referenced | [ ]  | Yes | [ ]  | N/A |
| Information sourced from authority (e.g. Dial Before You Dig) | [ ]  | Yes | [ ]  | N/A |
| Existing services maps/plans reviewed | [ ]  | Yes | [ ]  | N/A |
| Underground service location detection undertaken | [ ]  | Yes | [ ]  | N/A |
| Services & stressing cables have been located, marked & isolated or rendered harmless | [ ]  | Yes | [ ]  | N/A |
|  |  |  |  |  |
| Other **(specify)**: |       | [ ]  | Yes | [ ]  | N/A |
|  |  |  |  |  |

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| Excavations | Applicable | [ ]  | Yes | [ ]  | N/A |
| Excavations greater than 1.5m deep have been notified to WorkSafe (Victoria only) | [ ]  | Yes | [ ]  | N/A |
| Structural engineers certificate obtained/provided | [ ]  | Yes | [ ]  | N/A |
| Excavations will be adequately shored/battered/benched to prevent ground collapse | [ ]  | Yes | [ ]  | N/A |
| Site is adequately secured (e.g. fencing, hoarding) to control access & egress | [ ]  | Yes |  |  |
| Safe access/egress in & out of the excavation is provided (e.g. ladder) | [ ]  | Yes | [ ]  | N/A |

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| Excavations continued… | Applicable | [ ]  | Yes | [ ]  | N/A |
| An appropriate emergency response plan has been established | [ ]  | Yes | [ ]  | N/A |
| The risk of atmospheric contamination has been identified & controls implemented | [ ]  | Yes | [ ]  | N/A |
| Spotter in place | [ ]  | Yes |  |  |
| All fill/soil/waste to be removed from site by contractor | [ ]  | Yes | [ ]  | N/A |
|  |  |  |  |  |
| Other **(specify)**: |       | [ ]  | Yes | [ ]  | N/A |
|  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- |
| Penetrations | Applicable | [ ]  | Yes | [ ]  | N/A |
| Type of penetration work |
| [ ]  Coring | [ ]  Cutting | [ ]  Chasing | [ ]  Other (Specify): |       |
| Structural engineers certificate obtained/provided | [ ]  | Yes | [ ]  | N/A |
| Spotters used if works are penetrating through suspended slabs, walls or other blind areas | [ ]  | Yes | [ ]  | N/A |
| Any water or concrete slurry contained & appropriately disposed by contractor | [ ]  | Yes | [ ]  | N/A |
|  |  |  |  |  |
| Other **(specify)**: |       | [ ]  | Yes | [ ]  | N/A |
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| Additional Permits Required | Applicable | [ ]  | Yes | [ ]  | N/A |
| Hot Work | [ ]  | Yes | Fire System Impairment | [ ]  | Yes |
| Work at Height & BMU | [ ]  | Yes | Confined Space Entry | [ ]  | Yes |
| Critical Lifts | [ ]  | Yes | Roof Access | [ ]  | Yes |

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| Permit Approval |  |
|  |  |  |  |
| Copy of SWMS or risk assessment attached or saved on file? | [ ]  | Yes |  |
|  |  |  |  |
| **This permit is valid from:** | Start Date: |       | Time: |       |  |
|  | Expiry Date: |       | Time: |       |  |
|  |  |  |  |  |
| I understand the permit requirements & the controls specified will be implemented & monitored. |  |
|  |  |  |
| Permit Receiver: |       | Signature: |       |  |
| Permit Issuer: |       | Signature: |       |  |
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| Permit Close Out |  |
|  |  |  |  |
| I have checked the worksite. All persons & tools are accounted for & the site has been made safe: |  |
|  |  |  |
| Date: |       | Time: |       |  |
| Permit Receiver: |       | Signature: |       |  |
| Permit Issuer: |       | Signature: |       |  |
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