

## HAZARDOUS WORK PERMIT

## General Contractor Company Name: Contractor Representative's Name: Permit Issuer's Name: Worksite/Store:

Location of Task:

Permit Applying For			
Hazardous Activities	$\checkmark$		
Gas Services Work			
Electrical Isolation			
Asbestos Containing Material Work			
Trenching and/or Excavations			
Description of Work			

Describe the work you will be performing and how you will perform the work safety.	

Mandatory Control Measures	
Do you have a Safe Work Method Statement (SWMS) to undertake the work?	Yes
Do you hold the appropriate competency or trade license to complete the work?	Yes
If the site has an asbestos register has the contractor review the register prior to commencing work to ensure they are not working in an area with asbestos	Yes

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Authority to Work
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Authority to work			
The risk control measures and precautions controls have been implemented.	s are appropriate for the safe e	execution of the t	asks. The risk
Signed (contractor representative):	Date:.	//Time	ə
I have reviewed the contractor's risk manag activities and the documentation appears ac requirements. Signed (David Jones Permit Issuer)	dequate for the work to proceed	in accordance with	h the permit
This permit is valid until: Date:/	/Time:		
Persons Involved in Hazardous Work Act	tivities		
I have been advised of and understand the risk control measures and precautions to be observed during the work. I have read and understand the SWMS, including risk controls, relating to the hazardous work.			
work. I have read and understand the SWM	S, including risk controls, relating	g to the hazardous	s work.
work. I have read and understand the SWM Name	S, including risk controls, relating	g to the hazardous <b>Date</b>	s work. Time
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	-	-	

Cancellation of Written Authority						
The work area has been checked and made safe? Permit Issuer: Yes / No						
Signed (contractor representative):	Date	:/Time				
Signed (David Jones Permit Issuer)	Date	:/Time:				
Remarks or Comments:						

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