PERMIT TO WORK **Permit No.:**

Display the On Site Supervisor's copy of this Permit, any applicable drawings and attachments at the work site.

Permit Holder:	**For work at Site/Area/Location:**
Company:	Site Address: .....
.....	.....
Mobile Phone No.:	Site Phone: .....
Permit Issuer:	Site Person
Auth. Gas Tester:	In-charge: .....

The tasks below apply to the work: (Check those tasks that apply and use appropriate attachment in e.g.(a)	**Describe work, tools and hazards. Only the below work is to be done and the tools/equipment listed used**
- Confined Space Entry (a) - Live Electrical Work (b) - Working at Heights (c) - Other (specify) (d)	**Work**:..... .... **Tools**:..... .... **Hazards: As identified on attached JHA or listed below** ....

The below requirements must be in place before work starts and remain in place during the duration **Personal Protective Equipment (PPE) appropriate to the task at hand shall be worn/used at all times.** **Circle below any PPE that applies to this job**					
Safety Footwear	Eye Protection	Hearing Protection	Gloves	Hard Hat	High Visibility Vest
Fire Extinguisher(s) located at:			Number, Size & Type: 2 x 9kg		
Requirements to be in place:					