**HOT WORK - PERMIT TO WORK (Template)**

**This template must be used by the School/Branch unless an equivalent template has been developed which meets the requirements of AS1674 “Safety in welding and allied processes”.**

The [Hot Work](#Purpose) Frequently Asked Questions should be read prior to completion of this form.

Responsible Officer to complete:

**PERMIT NO. \_\_\_\_\_\_\_\_\_**

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| --- | --- | --- |
| Time of the hot work | This permit is valid from \_\_\_\_\_\_\_\_ am/pm on \_\_\_/\_\_\_/\_\_\_ to \_\_\_\_\_\_\_\_ am/pm on \_\_\_/\_\_\_/\_\_\_\_ | |
| Location | Campus: | Building (or nearest): |
| Room or Area (describe): | |

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| --- | --- |
| Description of the hot work to be covered by this permit |  |
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| Equipment to be used (including PPE)  eg, gloves, welders mask, shielding. |  |
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| **Site Inspection to be conducted by the Responsible Officer** | **Yes** | **N/A** |
| A Hot Work Risk Assessment has been conducted and attached |  |  |
| Other Work Permits identified completed and attached (e.g. Confined Spaces) if applicable |  |  |
| Fire detection systems have been isolated within the area for the duration of the hot work (contact Campus Security). |  |  |
| Services (electricity, gas, water, hydraulic) isolated if applicable |  |  |
| Warning signs and barricades are in place to prevent unauthorised entry |  |  |
| All persons involved with hot work have been trained and are competent |  |  |
| The Personal Protective Equipment identified on the Risk Assessment and Safe Operating Procedure are available for use |  |  |
| Spark/flash/protective screens are in place |  |  |
| Equipment is in good condition and conforms to required standards |  |  |
| Wind direction is satisfactory for hot work to be done (if applicable) |  |  |
| Combustible materials have been removed from the area or made safe |  |  |
| * Any fire hazard (including the presence of flammable or combustible liquids, gases, vapours, dusts, fibres or substances) within 15 m from the hot work has been identified and controlled |  |  |
| * Relevant hazards that may exist outside the area have been considered and protected appropriately |  |  |
| * Potential for a grass fire has been considered and immediate area cleared/soaked sufficiently to prevent a fire (if applic). |  |  |
| Emergency Systems are in place |  |  |
| * Fire equipment has been checked and is on stand-by at the work site |  |  |
| * If the work is within 15m of any combustible materials, fire watch procedures have been implemented, including a firewatcher to remain onsite until 30 minutes after the hot work has been completed |  |  |
| * All emergency numbers are clearly posted at the hot work area |  |  |
| * Adequate first aid kit/s and/or facilities are readily available at the hot work area |  |  |
| A safe entry to and exit from the hot-work area is available |  |  |
| Ventilation is adequate |  |  |
| Testing for the presence of flammable gas or vapour has been conducted within 15m of the hot work and in any pipe, drum, tank, vessel and piece of equipment adjacent to or involved in the hot work (results entered below) |  |  |
| The concentration of any flammable gas and flammable vapour is less than 5 percent of its lower explosion limit (LEL) |  |  |
| Drains, pits and depressions have been checked, isolated and sealed |  |  |
| Have tanks, valves, vents and pipelines been blanked off or effectively isolated? |  |  |
| Leaks from valve and pump glands, flanges and the like have been controlled |  |  |
| Contaminated ground has been covered |  |  |
| Pressure relief valves have been vented to safe areas |  |  |
| If hot work will be undertaken within a building the chief warden/local area warden and local building occupants have been informed of the intended work (including notification that the Fire Systems have been isolated if applicable).  (Refer to the Evacuation Posters for the names of Wardens or <https://www.adelaide.edu.au/infrastructure/staff-services/emergency/> ) |  |  |

***Gas testing shall be conducted if required after conducting the Hot Work Risk Assessment (use separate sheet if necessary)***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Equipment make and model | Serial No. | Date and  time of test | Results of tests | Percentage L.E.L. | Is hot-work safe to proceed? | Initials of tester |
|  |  |  |  |  |  |  |

**The following conditions and precautions were observed:**

***…………………………………………………………………………………………………………………………………………………………***

***…………………………………………………………………………………………………………………………………………………………***

***…………………………………………………………………………………………………………………………………………………………***

***The following Operators have been authorised and agree to abide by the conditions and precautions of this Permit***

|  |  |  |
| --- | --- | --- |
| Persons undertaking the hot work | Supervisor (Responsible Officer) |  |
| Name of Operator(s): |  |
|  |  |
| Name of Fire Watcher (if required): |  |
| Signature of Fire Watcher: |  |

**PERMIT AUTHORISATION**

I have read the University process for hot work and understand my role and responsibilities for this activity and the conditions of this permit. The Hot Work described on this permit is, in my opinion, safe to commence using all precautions described and that all persons nominated are adequately trained to undertake the work described in this permit. This permit is valid for the period nominated.

Supervisor (Responsible Officer).............................................................................................................................................................

(print name) (signature) (Date/ Time)

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| **THIS HOT WORK PERMIT MUST BE DISPLAYED PROMINENTLY AT THE WORKSITE**  **UPON COMPLETION, CANCELLATION OR WITHDRAWAL OF THIS PERMIT**  **IT MUST BE RETURNED TO THE ORIGINAL POINT OF ISSUE**  **A new permit is required in the event of an emergency or where:**   * + the hot work is to extend beyond the currency of the Permit, or   + the hot work ceases for a period of more than 2 hours, or   + the work location changes. |

**PERMIT COMPLETION**

The worksite has been inspected by me at the expiry/cancellation of this hot-work permit and declared safe for normal operations to resume. Contaminants have been disposed of appropriately and fire watch checks have been completed.

Supervisor (Responsible Officer)..............................................................................................................................................................

(print name) (signature) (date/ time)

**PERMIT CANCELLATION/ WITHDRAWAL**

This Hot Work Permit is hereby cancelled/withdrawn for the reason/s stated below:

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Supervisor (Responsible Officer)...............................................................................................................................................................

(print name) (signature) (date/ time)

**The original copy of this document is to be filed and maintained by the Supervisor (Responsible Officer)**

**(or delegate e.g. Health and Safety Officer) and a copy attached to the Risk Assessment (e.g. in RMSS or hard copy)**