

# I&TS HSW Management Sub-System

## 3.1-07FO2 Hot Work Permit to Work Form

The purpose of this Permit to Work (PTW) is to ensure that adequate controls are implemented to protect the safety of persons conducting, or who may be in the vicinity of high-risk work being undertaken & to protect University property from damage.

Hot Work Permit to Work (PTW) Number

**In the event of an Emergency, all PTW's are immediately suspended. All persons must assemble at the nearest nominated assembly point. The PTW must be re-authorised (Signed) by the PTW Issuer before work resumes.**

### 1. CONTRACTOR DETAILS

Company undertaking the work:			
Person undertaking the work & phone number:		Supervisor name & phone number:	
Principal Contractor Company:			
Principal Contractor Contact name & phone number:			

### 2. PROJECT DETAILS

University Project / Job No. (if applicable):		Location of Work: (inc. Campus/Building/Room):	
Planned Work Activity:			
Estimated Duration of the PTW: (No longer than 8 hours in any one day)	Date from:	Time:	Date to: Time:

### 3. WORK AREA MONITORING

Testing for the presence of flammable gas or vapour has been conducted within 15m of the hot work & in any pipe, drum, tank, vessel & piece of equipment adjacent to or involved in the hot work (results entered below) but not limited to the items identified. The concentration of any flammable gas & flammable vapour is less than 5 percent of its lower explosion limit (LEL) & Hot Work is safe to proceed.

Gas Test Equipment make & model	Serial No.	Calibration date	Test Results:	% of L.E.L.	Date of test	Initials of tester

Yes  
 No

Firewatcher Name	Signature	Date

### 4. ISOLATIONS REQUIRED

Isolation type: (attach forms if applicable)	<input type="checkbox"/> Electricity <input type="checkbox"/> Gas <input type="checkbox"/> Water <input type="checkbox"/> Mechanical <input type="checkbox"/> Fire Suppress <input type="checkbox"/> FIP           Other:
Document areas and equipment inclusive of research activities that will be affected by the isolation:	

### 5. GENERAL REQUIREMENTS FOR SWMS/JSA

The person in direct control acknowledges that the items related to PTW (below) have been considered & included in the attached SWMS/JSA. All items must be ticked or marked N/A (✓ or N/A):

GENERAL INCLUSIONS:	✓ or N/A	✓ or N/A
Company Details; name address & ABN		Names of workers consulted in developing the SWMS/JSA
Reference to relevant WHS Legislation, COPs & Standards		A Sign off sheet for workers
Worker responsible for ensuring implementation, monitoring & compliance is identified		Tasks are set out in a logical step-by-step sequence
Permits, licences & training is documented		Risks & controls are clear & specific
RISK & HAZARD IDENTIFICATION & CONTROL	✓ or N/A	✓ or N/A
All task specific hazards are identified Adequate controls & PPE are identified to eliminate or reduce the risk		Working Outdoor risks (including weather) are identified Traffic management & PPE must be referenced as controls
Workers are able to add site specific hazards Adequate controls & PPE are identified to eliminate or reduce the risk		Site Access & Egress risks are identified Site security & maintenance of disability access must be considered
Essential/fire services isolation needs are identified Isolation Request form must be referenced as controls		Environmental concerns are identified EPA compliant clean-up must be referenced as controls
Plant & equipment to be used is identified Pre start inspections & PPE must be referenced as controls		Hazardous Chemicals to be used are identified Safety Data Sheets & PPE must be referenced as controls

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**6. WORK SPECIFIC REQUIREMENTS FOR SWMS/JSA COVERED BY THIS PTW**

The person in direct control acknowledges that the items related to the PTW (below) have been undertaken & included in the attached SWMS/JSA.

**All Items must be ticked or marked N/A - (✓ or N/A)**

Drains, pits & depressions have been checked, isolated & sealed		Contaminated ground has been covered	
Combustible materials have been removed from the work area or made safe		Fire equipment has been checked & on stand-by at the work site	
Tanks, valves, vents & pipelines have been blanked off or effectively isolated		A fire pump or the fire brigade is on standby	
Ventilation is adequate		Wind direction is satisfactory for hot work to be done	
Spark/flash/protective screens are in place		Other work has been stopped in the area of Hot Work	
Leaks from valve & pump glands, flanges & the like have been controlled		The Hot Work site has been isolated & adequately barricaded	
Pressure relief valves have been vented to safe areas		Adequate first aid kit (including burns module) is readily available	
Local fire restrictions and requirement are observed and where applicable a Schedule 9 or 10 Permit has been obtained from the local council or CFS		Flashback arrestors are fitted on cylinders & hand pieces for welding equipment & oxy-cutting equipment.	

**7. PTW REQUEST (PTW Holder)**

This acknowledgement signifies a formal request to commence activities involving one or more specified high-risk works. I request this PTW be acknowledged & registered by the relevant University of Adelaide PTW Issuer. As the person requesting this PTW, I hereby certify that:

<b>ALL ITEMS MUST BE TICKED</b>	<input type="checkbox"/>	I have developed / reviewed the attached SWMS/JSA for the work covered by this PTW.					
	<input type="checkbox"/>	All work being undertaken covered by this PTW meets the current South Australian WHS legislative requirements.					
	<input type="checkbox"/>	I have inspected the area & deem it safe for Hot Work to be undertaken.					
	<input type="checkbox"/>	I am competent to co-ordinate this work activity in accordance with the attached SWMS / JSA.					
	<input type="checkbox"/>	I shall ensure that all persons required to carry out the work have: the relevant licences; attended the current University of Adelaide Contractor Induction; been consulted & understand the requirements of the SWMS / JSA & the PTW.					
	<input type="checkbox"/>	I shall implement all planned & necessary controls to ensure the health & safety of all persons who may be affected by the activities.					
	<input type="checkbox"/>	I shall monitor the identified hazards & control strategies throughout the work activities.					
	<input type="checkbox"/>	I have submitted this PTW to the relevant PCBU/Principal Contractor to ensure that controls are adequate.					
<b>PTW Holder Name:</b>		<b>Signature:</b>		<b>Date:</b>		<b>Time:</b>	

**8. PCBU/PRINCIPAL CONTRACTOR CONTRACTING THE WORK TO THE PTW HOLDER**

As the PCBU/Principal Contractor commissioning the work to the PTW Holder, I have reviewed the attached SWMS/JSA (& kept a copy for our records) for the work covered by this PTW to ensure:

<b>ALL ITEMS MUST BE TICKED</b>	<input type="checkbox"/>	Hazards & risks have been identified & adequate controls measures are implemented.					
	<input type="checkbox"/>	Workers undertaking the work are trained & competent to undertake this work in accordance with the attached SWMS / JSA.					
	<input type="checkbox"/>	All work being undertaken covered by this PTW meets the current South Australian WHS legislative requirements.					
<b>PCBU/Principal Contractor Rep:</b>		<b>Signature:</b>		<b>Date:</b>		<b>Time:</b>	

**9. I&TS PTW ISSUER**

The above criteria have been addressed and the work is authorised to commence in accordance with the SWMS / JSA and identified control measures. As the I&TS Permit Issuer, I hereby acknowledge that:

<input type="checkbox"/>	I have allocated this PTW a number and scanned to the PTW register in the relevant area.						
<b>PTW Issuer</b>		<b>Signature:</b>		<b>Date:</b>		<b>Time:</b>	

**10. CLOSE OUT**

As the PTW Holder, I hereby acknowledge that:

ALL ITEMS MUST BE TICKED	<input type="checkbox"/>	All Isolations have been removed and/or reinstated; work area was monitored for <b>60 minutes</b> after completion by nominated firewatcher with no indication of fire. Where combustible sandwich panels (e.g. EPS) are within the hot work area, a 2 hour extended monitoring period was incorporated after the fire watch. Note that active monitored smoke detection can be used in lieu of the extended monitoring period. All workers have vacated the space and the area has been left in a safe condition.			
	<input type="checkbox"/>	All near miss/hazards/incidents have been reported.			
	<input type="checkbox"/>	The PCBU/Principal Contractor has been informed that the work is complete & of the close out this PTW.			
<b>PTW Holder</b>		<b>Signature:</b>		<b>Date:</b>	
				<b>Time:</b>	

As the PTW Issuer, I authorise the closure of this PTW and will scan it to the PTW register in my area:

<b>PTW Issuer</b>		<b>Signature:</b>		<b>Date:</b>	
For further information on completing this isolation PTW refer to Section 3.1 Controlling HSW Risks PRO3.1-06 Isolation					

**Original – Retained by PTW Holder**

**Copy – Retained by PTW Issuer**