



Title: <b>General Work Permit</b>	Document No.:	Approved By:
Author:	Revision No.:	Date Approved:

<b>Work Order Number:</b>		<b>Method Statement/Risk Assessment Number:</b>	
<b>Permit Number:</b>			

**Section 1 to be completed by the Permit Requester**

<b>Permit Requester</b>	Name:		Company:	
<b>Intended Work Area</b>	Building:		Location Number:	

**Description of Work:**

<b>Work Supervisor:</b>	Name:		<b>Work Crew Names:</b>
	Contact #:		
<b>Contract Company:</b>	Name:		
	Contact #:		

**Section 2 to be completed by the Permit Requester**

<b>Services to be worked on:</b>	<b>Additional Permits Required:</b>		
Electrical	Mechanical	Hot Work	Fire Protection
Process Equipment	Utility Systems	Excavation	Line Break
Chemical Systems	Structural/Civil	Confined Space	Elevated Work
Other (describe)		Infection Control	Electrical

<b>Lockout/Tag Out:</b>	<b>Safety Information (Are you aware of the:)</b>	
Electrical	Moving Parts	Location of nearest emergency exit
Heat	Other:	Location of the nearest shower/eye wash station
Describe:		Location of the nearest telephone/radio
		Location of the assembly point

**Hazard Identification and Risk Assessment**

Is the area cordoned off or barriers erected?	
Are chemicals required for the task and has the SDS been reviewed?	
Is lighting and ventilation sufficient for the task?	
Is there sufficient access/egress in the work area?	
Are emergency access/egress routes clear?	

<b>Additional Hazards:</b>	
<b>Hazard</b>	<b>Control</b>

**List Personal Protective Equipment Required:**

**Section 3 to be completed by the Permit Requester and the Permit Authorizer**

<b>Permit Valid From:</b>	Start Date:		Start Time:	
	<b>To:</b>	End Date:		End Time:
	<b>Print Name</b>	<b>Signature</b>	<b>Date</b>	<b>Time</b>
<b>Permit Requester:</b>				
<b>Permit Authorizer:</b>				

**Section 4 to be completed by the Permit Requester and the Permit Authorizer**

*I am satisfied that this work has been completed satisfactorily and that the area has been left in a safe and clean*

	<b>Print Name</b>	<b>Signature</b>	<b>Date</b>	<b>Time</b>
<b>Permit Requester:</b>				
<b>Permit Authorizer:</b>				

**Section 5 to be completed by the Permit Authorizer or Plant Services Manager**

*Service Provider evaluation comments (use reverse side if required)*

