# HOT WORKS PERMIT

*Green and Blue sections to be completed by the party requesting to undertake hot works.*

| | |
|---|---|
| **Contractor (Name):** | **Contractor (Company):** |
| **Contractor (Mobile):** | **Location:** |
| **Description of Works** | |
| **Date of Works:** | **Time of Works:** |

| | | | |
|---|---|---|---|
| **Relevant Stakeholders advised of hot work occurring** | Select | **Confirm Fire Sprinklers are in service** | Select |
| **Area inspected for potential fire hazards by contractor** | Select | **Flashback arrestor installed & gas cylinders secured** | Select |
| **Additional extinguisher is provided** | Select | **Combustible materials have been removed from within a radius of 11metres** | Select |
| **All drains & ducts within 11 metres have been covered with fire resistant blankets** | Select | **Operator is trained to use fire extinguisher** | Select |
| **Hazardous materials, vapours or gases are not present** | Select | **Operator is aware of emergency procedures** | Select |
| **Are Fire System Isolations Required:** | Select | | |

**Signature:**

*Yellow Sections to be completed by Walker Asset Management*

| | |
|---|---|
| **Authorising person:** | **Position:** Select |
| **Date:** | **Phone:** |
| **Access Approved from:** | **Until:** |
| **Isolation Form Required:** Select | |

**Signature:**

*On completion of hot works:*

| | |
|---|---|
| **De-Isolations completed (if required).** | Select |
| **Area monitored by contractor for 60 minutes after work is completed.** | Select |
| **Building management/tenant advised hot works have been completed.** | Select |

**Signature:**

| | |
|---|---|
| **Authorising person:** | **Date:** |

**Signature:**

*Please return completed form to the Walker Facilities Management Team.*