

WORKING AT HEIGHTS PERMIT

Green section to be completed by the party undertaking works at heights.

Contractor (Name):	Contractor (Company):							
Contractor (Mobile):	Location:							
Date(s) of Access:	Time of Access:							
-	-							
Day(s) of Access:	<table border="0" style="width: 100%; text-align: center;"> <tr> <td>Mon</td> <td>Tue</td> <td>Wed</td> <td>Thu</td> <td>Fri</td> <td>Sat</td> <td>Sun</td> </tr> </table>	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Mon	Tue	Wed	Thu	Fri	Sat	Sun		
Description of Works:								

ISOLATION OF HAZARDS

Pipelines (water, steam, gas, fuel, etc)

Mechanical and/or electrical drives

Traffic flow in work area suspended or controlled

Electrical services

Air-conditioning and exhaust ducting

Warning notices, locks or tags have been fixed to all means of isolation

Other (specify):

FALL PREVENTION MEASURES

Barriers or barricading of work platforms

Use of fall prevention equipment

Inertia reels or lifelines

MEANS OF ACCESS TO WORK AT HEIGHTS

Scaffolding (type):

Height access or reach equipment (type):

Other (specify):

Signature:

WORKING AT HEIGHTS PERMIT

Blue section to be completed upon completion of works at height.

All personnel have been withdrawn from the work area

All tools and equipment have been/not been removed from work area

All work at heights has been completed/suspended

Gates / access doors to be locked to prevent unauthorised access

Work area is left clean and tidy

Signature:

Yellow Section to be completed by Walker Asset Management

Authorising person:

Position:

Date:

Phone:

Is the relevant SWMS appended:

Access Approved from:

Until:

Signature:

Please return completed form to the Walker Facilities Management Team.