

Confined space permit

AA/JSA/SOP Ref #: Permit #

Company name

Summary of work to be undertaken Detail only the work to which this permit applies

Do other permits apply to this activity? Refer to the job safety analysis form (JSA)

Hot work
 Working at height
 Excavations ≥ 1.5 metres
 Hazardous Energy
 Safety device impairment
 Explosive Atmosphere Area (EEHA)
 Other (specify)

Safety information

This activity has been assessed as a confined space because:

| | | | |
|--------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| the space is enclosed or partially enclosed AND | the space is not intended or designed primarily for human occupancy AND | the risk of one or more of the following may occur: (tick) | <input type="checkbox"/> An oxygen concentration outside safe oxygen range (19.5%-22%) <input type="checkbox"/> An airborne contaminant that may cause impairment, loss of consciousness or asphyxiation <input type="checkbox"/> A stored free-flowing solid or rising level of liquid that may cause suffocation or drowning by engulfment <input type="checkbox"/> An airborne contaminant that may cause injury from a fire or explosion. |
|--------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Declaration by permit receiver

| | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|-----|----|-----|----|-----|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|-----|----|-----|----|-----|----|
| <ul style="list-style-type: none"> I am competent to identify and manage the risks related to this work permit (evidence of training provided). I have used the Confined Space Decision Tree to risk assess this entry Access and egress have been planned and reviewed The activity-specific emergency response plan has been developed and communicated to the entry team | <table border="0"> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> </table> | Yes | No | Yes | No | Yes | No | Yes | No | <ul style="list-style-type: none"> Appropriate and adequate ventilation is provided A means of communication has been planned and agreed with the entry team All members of the entry team are confined space and gas detection trained A Confined Space Entry Certificate will be used to record the entry | <table border="0"> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> </table> | Yes | No | Yes | No | Yes | No | Yes | No |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | | | | | | | | | | | | | |

Confined space - emergency response plan

In the event of an emergency, document or attach detailed description of how rescue is going to be performed, including the individual steps that will need to be taken:

Work activity existing risk score:
Refer to JSA

Residual risk score:
Refer to JSA

Verified risk score: Verified on site by the permit receiver

| | | | |
|----------------------------------|----------------------|------|------|
| Networks/Transmission permission | Duty engineer (name) | Date | Time |
|----------------------------------|----------------------|------|------|

Permit issuer validation

I certify that I have reviewed the proposed work described on the Permit to Work documents and the JSA.

The Permit to Work is allowed:

| | |
|--------|----------------|
| from: | DD / MM / YYYY |
| until: | DD / MM / YYYY |

Name PI cannot be same person as PR.

Signature Date

Permit receiver validation

I certify that I am aware of the planned work and the controls detailed on this permit and the JSA. I will ensure that work only proceeds when the conditions set out are met. I will ensure that others working under it understand and abide by the conditions.

Name PR cannot be same person as PI.

Signature Date

Permit issuer

I confirm this permit is now cancelled.

Name PI cannot be same person as PR.

Signature Date

Permit receiver

I confirm that work under this permit is concluded, and the worksite is left in a safe and tidy state.

Name PR cannot be same person as PI.

Signature Date