

Hazardous energy 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
 ☐ Safety device impairment
 ☐ Confined space entry
 ☐ Explosive Atmosphere Area (EEHA)
 ☐ Other (specify)

Declaration by permit receiver

The following hazards and risks have been identified: *(Watercare isolation procedure and isolation certificate applies)*

• I am competent to identify and manage the risks connected to this work permit (evidence of training provided)	Yes	No	• Work in a high voltage room or within 2 metres of high voltage equipment	Yes	No
• Work on high voltage equipment	Yes	No	• Remote isolations	Yes	No
• Work on live equipment, electrical circuits, energised pipes or pressure vessels	Yes	No	• Emergency de-isolation	Yes	No
• Energising during testing or commissioning	Yes	No	• Live product work including all work either inside or on live, energised wastewater or water pipes, where either product or vapours may still be present	Yes	No

Isolation and hazardous energy management plan

Document or attach detailed description of how hazardous energy is going to be controlled during the activity. Record the isolations of the isolation certificate.

Work activity raw 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
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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	DD/MM/YYYY 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	DD/MM/YYYY Date

Permit Suspension (PS) and Permit Revalidation (PRv):
The permit must be suspended at the end of each working day OR handover of shift; OR following an emergency; OR at the discretion of the PI and PR. The PTW MUST be revalidated prior to work recommencing.

Date	PS (✓)	PI (initial)	PR (initial)	PRv (✓)	PI (initial)	PR (initial)
DD/MM						
DD/MM						
DD/MM						
DD/MM						
DD/MM						

Permit issuer

I confirm this permit is now cancelled.

Name	PI cannot be same person as PR.
Signature	DD / MM / YYYY 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	DD / MM / YYYY Date