	<h1>Hot Work Permit</h1>	Version No:	3.0
		Issued:	January 2009
		Reviewed:	23 November 2016
		Next Review:	23 November 2019

HOT WORK PERMIT: DISPLAY AT WORKSITE	Hot Work Permit Number:
Worksite	Permit valid from am/pm / / to am/pm / /


Task	Date
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As per the method of Hot Work and location described in the Risk Assessment, identify control requirements in the relevant parts below

General Hot Work Controls

Identify those general hot work and ignition controls required to be undertaken as part of the Hot Work:	Yes	NA	Controls
(identify as Yes or NA - Not Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers supplied by the workgroup/contractor are to be located immediately adjacent to the Hot Work area and within 15m of the work to be carried out (building/fixed location fire extinguishers are not to be relied upon).
	<input type="checkbox"/>	<input type="checkbox"/>	Catch mats or boards are to be positioned over grid-mesh, flooring or grates to catch sparks, slag or other hot debris. Spark and flash screens are in place.
	<input type="checkbox"/>	<input type="checkbox"/>	Combustible and flammable materials or fuel sources (including vegetation where practicable) are required to be cleared from the area (consider a 15m area around the hot work where practicable and include surfaces below & above the work area).
	<input type="checkbox"/>	<input type="checkbox"/>	Drains, cable racks, electrical cables and other heat/fire sensitive items are to be covered (consider a 15m area and use fireproof blankets, catch boards and approved covers as applicable)
	<input type="checkbox"/>	<input type="checkbox"/>	A fire watcher is required to watch the area during and/or post-work to monitor fire risk, sparks, slag, hot objects (consider for work that is arc welding, oxy-cutting or likely to present an ignition hazard post-work, and for work in hazardous areas, in confined spaces, outdoors and in windy conditions): <input type="checkbox"/> During Work, and/or <input type="checkbox"/> Post Work for a time period of minutes
<input type="checkbox"/>	<input type="checkbox"/>	The worksite has been isolated and traffic/pedestrian movement restricted	

Specific Hot Work Controls	Yes	NA	If Yes, document additional control details below:
The Hot Work is to be undertaken on or adjacent to plant and utilities that will require isolation (such as services, pipes, tanks, pressure vessels, valves)	<input type="checkbox"/>	<input type="checkbox"/>	
A fixed fire protection or detection system may need to be isolated (approval is required for the impairment and must be documented including the date, time the circuit is isolated and the time the circuit is re-established. Approval to be sought from: _____ <i>(Enter the name(s) of Council personnel authorising the isolation of the circuit)</i> – Where a fire detection system is disabled, emergency services and the LGA Mutual Liability Scheme must be notified if practicable.	<input type="checkbox"/>	<input type="checkbox"/>	
The work area will require specific cleaning, stripping, surface preparation, purging, ventilating or pre-work atmospheric monitoring (due to flammable/explosive vapours, dusts, liquids or solid residues in the work area/location, or as a result of surfaces/coatings that may create harmful emissions when heated or cut).	<input type="checkbox"/>	<input type="checkbox"/>	
The nature of the work requires specific respiratory protection to be worn.	<input type="checkbox"/>	<input type="checkbox"/>	
The hot work involves arc-welding whereby specific controls relating to ensuring electrical and radiation safety will be required.	<input type="checkbox"/>	<input type="checkbox"/>	

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Additional Controls:	<input type="checkbox"/> NA (Not Applicable)	
Confined Space: (Confined Space Permit to be used in conjunction with Hot Work Permit)	Yes	NA
Locate Hot Work equipment outside the space where practicable (such as gas cylinders, hoses, etc. unless involved with respiratory devices).	<input type="checkbox"/>	<input type="checkbox"/>
Extraction fan with its inlet to be located as close as practicable to the contamination source.	<input type="checkbox"/>	<input type="checkbox"/>
Contaminants are to be expelled from the space (so that they cannot be recirculated and will not harm other workers).	<input type="checkbox"/>	<input type="checkbox"/>
If arc-welding activities are to be suspended for substantial periods, power sources will need to be de-energised, electrodes removed from holders and holders placed so that accidental contact or arcing cannot occur.	<input type="checkbox"/>	<input type="checkbox"/>
If gas welding/cutting activities are to be suspended for substantial periods, torch and cylinder valves are to be closed, with the torch and hose connections removed from the space and depressurised.	<input type="checkbox"/>	<input type="checkbox"/>
Working at Heights:	Yes	NA
(Location)		
The hot work activity is located at an elevated level which has the potential for a fall hazard.	<input type="checkbox"/>	<input type="checkbox"/>
Fall protection equipment is required to perform the task safely.	<input type="checkbox"/>	<input type="checkbox"/>
The fall protection equipment is maintained in good condition and regularly inspected.	<input type="checkbox"/>	<input type="checkbox"/>
List type of fall protection equipment:		

Permit Requestor: As the person requesting this Permit, I certify that:			
1.	I am competent to coordinate this Hot Work in accordance with the Hot Work Procedure, Risk Assessment and this Permit;		
2.	I undertake to implement all required controls to ensure safe Hot Work methods, and will display this permit at the worksite; and		
3.	I shall monitor the Hot Work hazards and control methods throughout the duration of the Hot Work.		
Name:	Signature:	Date:	Time:
Name:	Signature:	Date:	Time:
Authorisation to work: This (Council) authorisation signifies that the Risk Assessment and Hot Work Permit have been completed and the Hot Work is authorised to commence in accordance with the Permit Request. This permit is to be displayed at the worksite.			
Name:	Signature:		
Position:	Date:	Time:	
Permit Cancellation: The worksite has been inspected by me at the expiry / cancellation of this Hot Work Permit and declared safe for normal operation to resume.			
Name:	Signature:		
Position:	Date	Time:	
DISPLAY THIS COMPLETED PERMIT PROMINENTLY AT THE WORKSITE			