

*All hot works generating heat, sparks or flame require a permit. This permit to work is issued to the nominated recipient for the specific occasion and date stipulated below:*

<b>SECTION 1 - TO BE COMPLETED BY THE PERMIT ISSUER (PERSON AUTHORISING THE PERMIT)</b>			
MEX Work Order No.			
Permit is valid from:		...../...../.....	To: ...../...../.....
Permit issued to:	Organisation/Company:		
	Contact name:		
	Telephone Number:		
Location of works (Campus/Building):			
Description of Hot Works:			
<b>Checklist &amp; Authorisation</b>			<b>Initial</b>
Risk Assessment has been carried out and is attached			

<b>SECTION 2 - TO BE COMPLETED BY THE PERMIT REQUESTOR (PERSON CARRYING OUT THE WORK)</b>			
<b>Checklist &amp; Confirmation</b>			<b>Initial</b>
I have, as far as reasonably practical, eliminated the risks associated with the hot works.			
I have submitted and had approved any additional permits required (e.g. Confined Space Permit, Fire Isolation).			
I acknowledge the following Emergency, Isolation and Precautions required.			
Emergency Information & Equipment:	If fire occurs call: ..... Telephone No. ( ) .....		
	Fire watch required: <input type="checkbox"/> yes <input type="checkbox"/>		
	Fire Fighting Equipment on hand? <input type="checkbox"/> fire extinguisher <input type="checkbox"/> hose reel <input type="checkbox"/> other:		
	Special Precautions:.....		
Isolations	<input type="checkbox"/> Fire detection system isolated (eg sprinklers, detectors) <input type="checkbox"/> Drains, pits and depressions been checked, isolated and sealed <input type="checkbox"/> Tanks, valves, vents, pipelines been blanked off or isolated <input type="checkbox"/> Doorways and other areas covered to prevent transmission of sparks <input type="checkbox"/> Other (specify):		
Precautions	<input type="checkbox"/> Combustible materials been removed (eg within 10m of hot work)? <input type="checkbox"/> Wet down non-removable combustible items <input type="checkbox"/> Spark/flash screens in place <input type="checkbox"/> Covers suspended beneath work to collect sparks <input type="checkbox"/> Protected personal and electrical equipment <input type="checkbox"/> Non-sparking tools <input type="checkbox"/> Air conditioning units isolated <input type="checkbox"/> Physical barriers and signage to restrict access <input type="checkbox"/> Additional precautions (if none state none):		
Other Precautions required :	Method/technique:		
	Materials:		
Times:	Start: am/pm	Finish: am/pm	
I have read and understood the requirements and procedures described in this permit.			
<b>NAME:</b>		<b>SIGNATURE:</b>	<b>DATE:</b>
<b>JCU AUTHORISING PERSON:</b>		<b>TITLE:</b>	<b>DATE:</b>

<b>SECTION 3 - TO BE COMPLETED BY THE PERMIT REQUESTOR &amp; PERMIT ISSUER (JCU EO)</b>		
<i>Person Carrying out the work: The permitted work has been completed and the Fire Alarm System may be returned to full operational condition.</i>		
<b>NAME:</b>	<b>SIGNATURE:</b>	<b>DATE:</b>
<i>Authorising Person: I have inspected the work area and all works have been completed and the Fire Alarm System is in full operational mode.</i>		
<b>AUTHORISING PERSON:</b>	<b>SIGNATURE:</b>	<b>DATE:</b>