

HSE-GUI-003g HIGH VOLTAGE PERMIT



This permit to work is issued by a JCU High Voltage Keyholder to the nominated recipient for the specific occasion stipulated below:

SECTION 1 - TO BE COMPLETED BY THE JCU HIGH VOLTAGE KEYHOLDER PERMIT ISSUER (PERSON AUTHORISING THE PERMIT)			
MEX Work Order No.			
Permit is valid from:		Hrs on	To: Hrs on
Permit issued to:	Organisation/Company:		
	Contact name:		
	Telephone Number:		
Location of High Voltage activities: <small>(attach plan of area showing high voltage areas and/or exclusion zones)</small>		As shown on GIS site map	
Reason for and description of works:			
Checklist & Authorisation			Initial
Risk Assessment has been carried out and is attached.			
Safe Work Method Statement has been produced and is attached.			
Will the works impact or disturb asbestos containing materials?			Y / N
If Yes, has an Asbestos Work Permit been submitted by the Contractor?			Y / N
Manager, Infrastructure Services has reviewed and approved supporting documentation for high voltage work.			
A spotter, trained as an Individual of a work group for Safe Entry to HV Enclosures will be in attendance for the duration of the activities.			
I have examined the area specified and permission is given for the work to start, subject to the conditions hereon			
SECTION 2 - TO BE COMPLETED BY THE PERMIT REQUESTOR (PERSON CARRYING OUT THE WORK)			
Checklist & Confirmation			Initial
I have inspected the work area with the JCU HV Keyholder and understand the scope of the work to be performed.			
I have positively located and marked all underground services.			
I understand and have signed the Safe Work Method Statement (SWMS) for the work			
I have submitted and have had approved any other relevant work permits			
If any unknown suspected ACM is encountered, work will cease immediately and JCU Estate Directorate will be notified			
Identified below are the Site Specific Hazards as per the Risk Assessment and SWMS (tick as appropriate):			
<input type="checkbox"/> Buried electrical / communication cables <input type="checkbox"/> Buried water service			
<input type="checkbox"/> Buried gas / compressed air services <input type="checkbox"/> Storm water / Sewer drains			
<input type="checkbox"/> Overhead power lines <input type="checkbox"/> Open excavations nearby (possibility of collapse)			
<input type="checkbox"/> Traffic Management Plan <input type="checkbox"/> Barricades / temporary cover plates			
<input type="checkbox"/> Signs / flagging / bunting / lights required			
<input type="checkbox"/> Other (please specify)			
Other precautions required:			
NAME:		SIGNATURE:	DATE:
JCU AUTHORISING PERSON:		TITLE:	DATE:

SECTION 3 - TO BE COMPLETED BY THE PERMIT REQUESTOR & PERMIT ISSUER (JCU ED)		
<p>Person Carrying out the work: The permitted work has been completed and area is clear of any people, materials and tools and the area has been returned to a clean and safe condition.</p> <p>The following unforeseen services or conditions were encountered during the completion of this task:</p> 		
NAME:	SIGNATURE:	DATE:
<p>Authorising Person: I have inspected the work area and the area has been reinstated as agreed. Any high voltage information has been passed on to the Manager, Infrastructure Services.</p>		
AUTHORISING PERSON JCU HIGH VOLTAGE KEYHOLDER:	SIGNATURE:	DATE: