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| **Permit to Work No:** |  |  |
| This Permit is valid from:  |  |  | a.m. / p.m. | Start Date: |  |
| This Permit is valid until:  | Time:  |  | a.m. / p.m. | Expiry Date: |  |
| PrimePort Staff/Contractor(s), or Port User/Contractor(s) must complete this page only. The PTW form shall be submitted to the relevant PrimePort Permit Issuer **AT LEAST 48 WORKING HOURS** prior to the requested commencement date in order to obtain final authorisation to undertake the stated work on PrimePort Timaru property. |
| **PrimePort Contractor, Port User Contractor or Port User (i.e. the Permit to Work applicant), initiating the work to complete page 1 only.**  |
| Company Name: |  |
| PTW Supervisors Name: |  |
| Contact Phone Number: |  | Email Address: |  |
| Work Description & Location: – |
|  |
| **Type of equipment to be used – e.g. excavator, forklift, truck mounted crane, etc.** |
|  |
| List Job Requirements: –  |
| 1. Will a hot work permit be required?
 | Y | N |
| 1. Will under, or over water work be required?
 | Y | N |
| 1. Will structural penetration be required?
 | Y | N |
| 1. Will electrical isolation be required?
 | Y | N |
| 1. Will water shutdown be required?
 | Y | N |
| 1. Will ground penetration/excavation be required? (e. g. direct drilling, piling, trenching etc.)
 | Y | N |
| 1. Will mobile crane/truck mounted crane work be required?
 | Y | N |
| 1. Will an overweight/over dimension road permit be required for the vehicle?
 | Y | N |
| 1. Will travel or operation of any tracked machinery on any wharf, asphalt or other paved area be required?
 | Y | N |
| 1. Will traffic management be required?
 | Y | N |
| 1. Will there be any risk of a fall from height?
 | Y | N |
| 1. Will work in ceiling, wall, floor spaces or other confined spaces be required?
 | Y | N |
| 1. Will a Council, or statutory authority permit or approval be required?
 | Y | N |
| 1. Will any construction, repair, demolition and/or any earthworks be required?
 | Y | N |
| 1. Will your worker be working alone? (*If “Y” a copy of your company’s working alone procedure supplied)*
 | Y | N | N/A |
| 1. Will any of the work require a notification of particular hazardous work lodged with WorkSafe NZ?
 | Y | N |
| Any “Yes” questions 1-14 above, requires a Job Safety Analysis – is it attached?  | Y | N |
| Have your worker(s) completed a PrimePort health and safety induction?  | Y | N |
| Have you submitted a Site Safety Management Plan to the Permit Issuer? *(Must be specific to the worksite)* | Y | N |
| If contracted by PrimePort Timaru, have you signed the Contractor H&S Obligations document?  | Y | N/A |
| Signature of Permit to Work Applicant:  | Date:  |