

**Section 1: Work Summary**
**Purpose**

This Excavation Permit Form must be completed and approved prior to commencement of excavation works which has potential to cause a hazard to people, or damage to infrastructure or services on Southern Ports land.

**Permit Requestor**

The *Permit Requestor* is to complete this section. Include machinery to be used, parameters for depth, width and length of excavation, and any other relevant information.

|                       |                                                                                                     |       |  |                   |  |
|-----------------------|-----------------------------------------------------------------------------------------------------|-------|--|-------------------|--|
| Permit Requestor Name |                                                                                                     |       |  | Contact Number    |  |
| Company               |                                                                                                     |       |  | Department        |  |
| Position in Company   |                                                                                                     |       |  | Application Date  |  |
| Proposed Start Date   |                                                                                                     |       |  | Proposed End Date |  |
| Work Order or Scope   |                                                                                                     |       |  | Permit Number     |  |
| Port                  | <input type="checkbox"/> Albany <input type="checkbox"/> Bunbury <input type="checkbox"/> Esperance |       |  | Location          |  |
| Excavation Length     |                                                                                                     | Width |  | Depth             |  |
| Equipment             |                                                                                                     |       |  |                   |  |
| Description of Works  |                                                                                                     |       |  |                   |  |
|                       |                                                                                                     |       |  |                   |  |
|                       |                                                                                                     |       |  |                   |  |

**Safe System of Work**

The *Permit Requestor* is to submit supporting documents as required.

|                                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Job Hazard Analysis <input type="checkbox"/> Safe Work Method Statement <input type="checkbox"/> Traffic Awareness Plan <input type="checkbox"/> Other (specify) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Section 2: Work Preparations**

If no is selected for any of these preparations, discuss further with Southern Ports Engineering and Electrical Supervisor.

| #  | Preparations                                                                                                                                                           | Yes                      | No                       |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1. | When developing the Scope of Work and conducting a Risk Assessment for a structural excavation, it shall be assumed that the structure may contain concealed services. | <input type="checkbox"/> | <input type="checkbox"/> |

## Excavation Permit Form

|     |                                                                                                                                                                                                                                                               |                          |                          |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 2.  | Notify the Electrical Supervisor (or their Delegate) 48 hours before work commences to allow for a Site Survey to consider electrical services and isolations.                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.  | Is an Electrician required to be present at the time of excavation?                                                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.  | Has a dial before you dig (DBYD) check been completed (attach)                                                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.  | Have cancelled electrical and utility services been checked?                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.  | Have workers been made aware of the location of services (drawings)?                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.  | Have workers been made aware of the need to immediately stop work and contact Health and Safety team if Asbestos is found or suspected?                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.  | Has material and excavation appropriate benching and shoring been implemented (attach design)                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.  | Has barricading and signage been put in place                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. | Physical service location identifying process in place such as pot-holing, wandering / GPR is being used                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. | Has the asbestos register (D23/2756) been consulted to identify old underground services?                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. | Before excavating in Port of Esperance, is the excavation in a contaminated area marked in the "Contaminated Fill" layer of Virtual Port, if yes or not sure, contact the site Environmental Team.                                                            | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. | Before excavating in Port of Bunbury, confirm whether the work area is identified in Virtual Port as having a contaminated site status of "Contaminated - Restricted Use". If it is, or you are unsure contact the Site Environmental Team before proceeding. | <input type="checkbox"/> | <input type="checkbox"/> |

**Site Location** The *Permit Requestor* is to attach or provide a sketch below showing the site location for the excavation works.

**Section 3: Site Survey**

Site plans, survey information and dial before you dig have been obtained, work location reviewed for proximity and potential impact to services (underground and overhead), including integrity of structures and the competent person for each aspect have noted any controls or notifications required.

*Electrical  
Services*

|                                            |  |             |  |
|--------------------------------------------|--|-------------|--|
| <i>Licenced Electrician/ HVO Name</i>      |  | <i>Date</i> |  |
| <i>Licenced Electrician/ HVO Signature</i> |  | <i>Time</i> |  |

*Engineering  
Integrity*

I have surveyed the area and considered the impact on the integrity of the structure for the works.

|                           |  |             |  |
|---------------------------|--|-------------|--|
| <i>Engineer Name</i>      |  | <i>Date</i> |  |
| <i>Engineer Signature</i> |  | <i>Time</i> |  |

*Controls*

Identify any services or infrastructure specific isolations, protection controls or third-party notifications required below, aspects to take into include consideration Electrical, Structural, Pipelines (Gas, liquid fuel etc), Communications.

| <i>Work Area Aspect</i> | <i>Control (attach additional information as required)</i> | <i>Notifications (e.g. Asset Owner)</i> |
|-------------------------|------------------------------------------------------------|-----------------------------------------|
|                         |                                                            |                                         |
|                         |                                                            |                                         |
|                         |                                                            |                                         |
|                         |                                                            |                                         |
|                         |                                                            |                                         |

**Section 4: Acknowledgement and Approval**

*Permit  
Requestor*

I acknowledge the requirements of Southern Ports to identify and control risks and work in a safe manner at all times. I confirm the company has satisfactory documented safe systems of work in place, that all required permits and licences are in order and understood, and that I will comply with any special conditions in the statement of approval.

*Permit  
Approver*

I am satisfied that the contractor information provided to me is sufficient to show that there is a system in place to conduct works in a safe manner. The Permit is approved subject to the conditions below.

*Conditions*

|                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> A copy of this Permit must be kept with the party during the works to be shown to Southern Ports workers on request. |
| <input type="checkbox"/>                                                                                                                                 |

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |

|           | Name | Position | Signature | Date |
|-----------|------|----------|-----------|------|
| Requestor |      |          |           |      |
| Approver  |      |          |           |      |

### Section 5: Statement of Completion

#### Completion

I acknowledge the requirements of Southern Ports were carried out according to the Permit. New or changed services as built information has been returned to Southern Ports GIS to updated services maps and Dial before you dig information.

|           | Name | Position | Signature | Date |
|-----------|------|----------|-----------|------|
| Requestor |      |          |           |      |
| Approver  |      |          |           |      |

#### Comments

A copy of the Permit is controlled by the *Permit Approver*. The original Permit must be kept on site by the *Permit Requestor* and returned to the *Permit Approver* on completion.