

## **Work Afloat Permit**

Alb	any Po	rt area. This ma	ee of obtaining permission to conding include works such as fender mater with this application					
Sec	ction 1	: Permit Dates						
Date			Permit Valid From	Permit Valid To		alid To		
Sec	ction 2	: Applicant Det	ails					
Name of Applicant				Contact No:				
Company								
Description / Duration of Works		n / Duration of						
Ship/Site Location								
Equipment								
Sec	ction 3	: Please tick ye	es or no to the following					
Ple	ase Tick relevant box				Yes	No		
1	Has a JSA been completed and submitted							
2	Do you have an emergency contact and evacuation procedure in place?							
3	Do you have the required competency to operate a small vessel (minimum requirement is a Restricted Coxswains ticket for operating a vessel under 8m within the Port Area)?							
4	Do you have all of the required safety equipment aboard (check the Dept of Transport website for clarification)							
5	Have you checked with the wharf supervisor to ascertain the shipping schedule?							
6	Is all of your equipment in good order and compliant with any applicable legislation and standards?							
7	Do you have an appropriate VHF marine band radio for communications?							
8	Will you maintain observations of weather and sea conditions to ensure a safe working environment?							
Sec	ction 4	: Applicant / C	ontractor Statement of Acknow	ledgement				
at a	all times	s. I confirm the o	ments of the Southern Ports Albar company has satisfactory documer in order and understood.					
Name Signature						nature		
			Date	Position				

Document Owner: Authorised by:

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Version No: 02 Reference No. APAOHS-06

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Section 5: Southern Ports Albany Representative Statement of Acknowledgement (Southern Ports Use Only)									
I am satisfied that the contractor information provided to me is sufficient to show that the contractor has a system in place to fulfil their legal obligations to conduct works in a safe manner. This Permit to Work is approved subject to any conditions listed below.									
Southern Ports Representative									
	Name	Signature							
Time	Date	Position in Company							
Specific Conditions / General Comr		r osition in company							
·									
Southern Ports may withdraw this permit at any time if unsafe work practices are seen									
Section 6: Notifications									
Engineer	Safety	Security							
Maintenance	Environment	Pilots							

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