

This permit is required to be completed and approved before any working at heights by any personnel is undertaken. All sections MUST be completed, to ensure safety, and injury protection resulting from falls. If the task being performed is not standard procedure, then this permit must be accompanied by a JHA, before consideration for approval of works.

Section 1: Applicant Details

Name:		Works Start Date:	
Company:		Works Completion Date:	
Works Site Area:			
Description of work to be undertaken:			

Section 2: Work Site Area - Please Tick all boxes – if not applicable tick N/A

	Yes	N/A
JHA completed and submitted		
Plant area , site and equipment isolated and tagged out		

Work Area Inspected for:

	Yes	N/A
Weak surfaces that do not support body weight		
Openings which are not protected		
Open edges at raised work station(s)		
Slippery or uneven Surfaces		
Exposure to adverse weather conditions		
Hazchems, inflammable liquid , gasses , electrical		
Anchor points for fall arrest systems		

Section 3: Working Equipment - Please Tick all boxes – if not applicable tick N/A

Works requires the use of:

EWP	Yes	N/A	Scaffolding	Yes	N/A	Work Platforms	Yes	N/A
Man Cage	Yes	N/A	Ladder(s)	Yes	N/A			

All equipment to be used as stated above meets required AUST Standards.	Yes	N/A
All equipment to be used as stated above has been checked for any defects.	Yes	N/A
If using classified equipment, all other associated permits have been completed and approved	Yes	N/A

Section 4: Personal Protective Equipment and Measures

Please Tick all boxes – if not applicable – write N/A		Tick
8	Safety Harnesses checked for defects and in current survey	
9	Safety attachments – ropes, eye bolts, and shackles checked for defects and approved type	
10	Correct PPE – hard hats, safety boots, vests etc for task being performed	
11	Correct selection of power , hand tools and power leads and storage container	
12	Placement of barricades and signs at a safe working perimeter beneath working area	
13	Correct ladder selection, including placement positions, security and correct accent angles	

14	Supervision of personnel undertaking works at height			
15	Communications between all parties, with emergency and first aid plan established			
Section 5. Applicants Compliance				
I, hereby agree and comply with the conditions as stated above for approval of this permit.				
Signature:		Position:		
Name:		Date:		
Section 6: Approval				
This Permit is: APPROVED YES NO				
Comments and any special conditions				
Signature:		Position:		
Name:		Date:		