

Request to Activate Access Card

REQUIRED NOTICE:

This completed form must be forwarded to portsecurity@southernports.com.au and approved before access to Southern Ports (SPA) is granted.

Applications are processed during office hours, Monday to Friday 7:30 am – 3:30 pm

ALL SECTIONS (1 to 6) OF THIS FORM MUST BE FILLED OUT CORRECTLY

Section 1: Company / Manager Requesting Access									
Company Name:					Date:				
Requesting Manager Name:					Posit	ion:			
Section 2: On Site Contacts									
Company Rep:					Tel N	o:			
SPA /Contractor Manager:					Tel N	o:			
Section 3: Permit to Work (A Permit to Work is required to be authorised by your SPA-Esp representative before commencing any work on site)									
Section 4: Reason for Access (Give a description of area and type of work to be carried out)									
Date and Duration for Access:	Start Date:			Start Time:					
	End Date:			End Time:					
Section 5: Persons Requiring Access									
Name	Company			Individual Dat		ual Date	es	Access Card No.	
				Start Date End Date		ate			
Note: Inductions and visitor cards must be arranged in advance through the Port Security Manager.									
EXPIRED CARDS CAN NOT BE ACTIVATED. A NEW INDUCTION MUST BE COMPLETED									
Section 6: Request Assurance									
Requesting Manager Signature						Date:			
Section 7: OFFICE USE ONLY									
Date Access Granted:	Date Access Voided					d:			
Recorded in Data Base:	Yes □ No	No □ Recorded by:							

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