

Section 1: Work Summary

Purpose This Confined Space Entry Permit Form must be completed and approved prior to commencement of works requiring confined space entry at Southern Ports.

Permit Requestor The *Permit Requestor* is to complete this section.

Permit Requestor Name		Contact Number	
Position in Company		Application Date	
Proposed Start Date		Proposed End Date	
Work Order or Scope		Permit Number	

Works

Port	<input type="checkbox"/> Albany <input type="checkbox"/> Bunbury <input type="checkbox"/> Esperance	Location	
Description of Works			

Safe System of Work The *Permit Requestor* is to submit supporting documents such as rescue plans and traffic awareness plans, as required.

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

Standby Persons

The following standby persons have been appointed for the works. Communications method established. Class T4 intrinsically safe radio shall be used for hazardous atmospheres or sulphur space entries.

Standby Person 1 Name		Standby Person 1 Contact Number	
Standby Person 2 Name		Standby Person 2 Contact Number	

Chemicals

The following chemicals will be used for the works. Copies of Safety Data Sheets for any chemicals used are attached.

Confined Space Entry Permit Form

Section 2: Work Preparations

Isolations

Isolations will be in place and isolation locks and tags affixed to isolation points if applicable to the works.

#	Preparations	Yes	N/A
1.	Warning signs and barricading will be in place around the confined space area.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Isolations will be in place and isolation locks and tags affixed to isolation points if applicable to the works. a. Fluid and Air Isolation, for example pneumatic, hydraulic, water, fire or dust suppression. b. Electrical isolation. c. Mechanical isolation, for example CV36 shuttle lock pin. d. Stored energy, for example conveyor belts or counter weights.	<input type="checkbox"/>	<input type="checkbox"/>
3.	The following precautions will be in place prior to work commencing if applicable to the works. a. Is the area clean of all combustible or hazardous material, such as sulphur? b. Is all electrical equipment low voltage or protected by a Residual Current Device? c. Are electrical cables suspended or protected to prevent damage? d. Are electrical cables suspended or protected to prevent damage? e. Has a Hot Work Permit been completed and authorized?	<input type="checkbox"/>	<input type="checkbox"/>

Atmospheric Testing

Recording of Gas Levels before and during entry to the Confined Space.

#	Step	Yes	N/A
1.	Continuous Gas Testing	<input type="checkbox"/>	<input type="checkbox"/>
2.	Is Repeat Gas Testing Required? Repeat Gas Testing every:	<input type="checkbox"/>	<input type="checkbox"/>

Initial Atmospheric Oxygen and Gas Testing

Safe Entry Limits			Below 5%	20-23.5%	0-9 ppm	0-29 ppm	0 ppm
Date	Time	Hold	LEL	O ₂	H ₂ S	CO	SO ₂
		1.					
		2.					
		3.					
		4.					

Authorised Gas Tester

Authorised Gas Tester Name		Date	
Authorised Gas Tester Signature		Time	

Section 3: 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 information provided to me is sufficient to show that there is a system in place to fulfil the legal obligations to conduct works in a safe manner. The Permit is approved subject to the conditions below.

	Name	Position	Signature	Date
Requestor				
Approver				

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 demand.
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Notifications

Notification are to be given to stakeholders and affected workers conducting simultaneous operations in the vicinity.

<input type="checkbox"/> Health & Safety	<input type="checkbox"/> Environment	<input type="checkbox"/> Security	<input type="checkbox"/> Engineer	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Harbour Master
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Section 4: Ongoing Gas Testing

*Ongoing
Atmospheric
Oxygen and
Gas Testing*

Recording of Gas Levels during entry to the Confined Space, if required.

Safe Entry Limits			Below 5%	20-23.5%	0-9 ppm	0-29 ppm	0 ppm
Date	Time	Hold	LEL	O ₂	H ₂ S	CO	SO ₂
		1.					
		2.					
		3.					
		4.					

*Authorised Gas
Tester*

<i>Authorised Gas Tester Name</i>		<i>Date</i>	
<i>Authorised Gas Tester Signature</i>		<i>Time</i>	

Section 5: Statement of Completion

I acknowledge the requirements of Southern Ports were carried out according to the Permit. The works have been completed, standby is no longer required and the work area has been re-instated to operational safe level

	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.