

## **ELECTRICAL WORK PERMIT**

 File ref:
 SHP\_\_\_/

 Version:
 V1.4 / 76555

 Issue date:
 Feb 2020

**Permit No:** 

This permit is required for any work on or near high or low voltage equipment. Note: for any work involving isolation please also refer to the KPA Lock out Tag out Procedure.

SECTION 1: Applicant Detail's										
Name of Permit Applicant	Name:	Name:								
(person undertaking work onsite)	Contact No:									
Company										
Company representative/	Name:	Name:								
contact filling out permit (if	Contact No:	Contact No:								
different to permit applicant)	Email:	Email:								
SECTION 2: Description	of Location and Ac	tivity								
Vessel Name or Site Location	1									
High Voltage		Low Voltage								
Description of Works:										
Equipment being used:										
SECTION 3: Permit Dates										
Permit Requested For (to be	e filled out by permit ap	oplicant)								
Start Date:		End Date:								
Start Time:		End Time:								
Permit Dates Authorised (to be filled out by Permit Authoriser)										
Start Date:		End Date:								
Start Time:		End Time:								
SECTION 4: Permit Conditions  Permit Applicant to tick yes or no to the following:  YES NO										
Permit Applicant to tick yes or no to the following:					NO					
Will a pre-start discussion take place?										
2. JHA/Procedure has been prepared and is available for the works which includes steps for equipment isolation and shut down?										
<ol><li>If conducting HV work, has the minimum distance to be maintained from the high voltage area been explained to those involved</li></ol>										
4. Will a spotter/sentry be nominated?										



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5. Will the area be barricaded/cordoned off and warning signs displayed?											
The required PPE has been identified and will be worn by all persons involved in the activity?											
7. Is the ed	uipment yo	ou are using fit fo	or purpose?								
SECTION 5	SECTION 5: Applicant Statement of Acknowledgement										
	By signing this document, the Applicant:										
<ul> <li>Agrees that they are responsible for the works being undertaken and that they will work in a safe manner at all times and ensure that their contractors work in a safe manner;</li> </ul>											
Confirms that the company they represent and contractors they use at the Port of Broome will:											
(i) have safe systems of work in place;											
(ii)											
(iii) (iv)		petent in the typo required permits	-	undertaken; an	10						
Signature:	noid all	required permits	and licences.	Position:							
					, ,						
Name:				Date:	/ /						
SECTION 6: KPA Permit Authoriser Review											
☐ Check permit is filled out correctly											
Clarify details with applicant where required.											
☐ Check scheduling for other permits and activities											
For KPA contractors, ensure the relevant KPA contact has been advised of the work (i.e. Maintenance											
departme	ent, Enginee	ring or Operations	5)								
SECTION 7	· KPA Pe	rmit Authorise	er Statement	of Acknowled	dgement (KPA Use O	nly)					
					confirm that this Permit		ric				
		y conditions liste		works and can	Commin that this Femili	to vvoir	. 13				
Signature:		-		Position:							
Name:	Date:			Date:	/ /						
Special Condapproval – if											
αρριοναι π	шту										
SECTION 8: Completion Sign Off. (Provide form to Gatehouse or KPA contact on departure)											
Permit Applic	ant		Signature:		Date &						
. оппи дрио	arit .		Jigriature.		Time						
KPA Rep		Signature		Date & Time							