

# EPS CM P07 - WORK AT HEIGHT PERMIT

GENERAL			
Job Details:			
Access equipment to be used:			
Job Location:			
Is there any other work being undertaken that may interact or affect this permit?			
<b>THIS PERMIT IS ONLY VALID WHEN ALL SECTIONS ARE COMPLETE.</b>			
HAZARDS AND PRECAUTIONS TO BE TAKEN Primary Hazards – Fumes, Electrics, Gases, Liquids, Uneven Ground			
PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY	YES	NO	
Are you qualified to undertake this work?			
Is the above working at height method identified in contractors RAMS?			
If using Mobile Towers / Podiums, have these been erected correctly by PASMA operatives? (Guard rails at correct heights, toe boards etc.)			
If using a MEWP, has this been subject to checks under PUWER within the past 7 days by an IPAF operative?			
Is there risk of any falling objects?			
Does the work area need to be barricaded or signage displayed?			
Is scaffolding and/or harness required?			
If yes is scaffolding in place and with a documented inspection within the last 7 days?			
If using a harness, has the harness been inspected?			
For outdoor works, are weather conditions acceptable? (only lift when acceptable)			
Are there any existing overhead services crossing and/or adjacent to proposed working height?			
Is further edge protection required?			
Is any further task specific Personal Protective Equipment required?			
Other Precautions Required:			
Other Safety Equipment Required:			
AUTHORISATION AND ACCEPTANCE			
I confirm that I have verified the above information and ensured the necessary precautions have been taken. It is safe to carry out the work as defined above and the permit information has been explained to all workers involved. I accept responsibility for this work.			
Person in Charge:		Company:	
Signature:		Date:	Time:
Authorising Person:			
Expiry Details (No longer than one week)		Date:	Time:
HANDBACK AND CANCELLATION			
I confirm that the work has been completed/partially completed, checked by myself and the area left in a safe and tidy condition			
Person in Charge:			
I have inspected the completed/ partially completed work and hereby cancel this permit.			
Authorising Signature:		Date:	Time: