TE OPE KATUA O AOTEAROA DEFENCE FORCE		S	Permit To Work - Receiver Status: Permit #:						
PVID#:		Contractor/Company	Name:				JARS Cor	tractor ID:	
Camp/Base:	FLOO						Version:		
Work Site Location (Building):				Location of work on Site (Room/Level/Elevation)					
Description of Work:					<u> </u>				
Permit Receiver:	Name: Phone/Mob: Email:								
Date/Time	Start Date:	Sta	art Time:	rt Time: End Date:			End Time:		
Section 1. Identify Indicate	-	it Certificate is required	d by ticki	ng the box(es) that best de	scribes the ty	/pe of work	being perfo	rmed.
(6) Penetrating Structure (7		(2) Ground disturbance(7) Asbestos(12) Hazardous Substance	(8) Hot Work (4) Lifting) Pipe works (9) Work at Height 3) Electrical (14) Explosives		(5) Gas (10) Tree Felling (15) Control Bypass			
	-	ds Involved in the Perm Irds will be present duri							
ContaminationHeChemical exposureCoAcids/causticsHeAsbestosSe		lot environment Fi cold environment U lot/cold surfaces N		allingPower toolsalling objectsElectricalJneven surfaceLimited accessJechanical liftingHeavy liftingxcavationPinch pointsSDS reference:		High pressure Eye hazards Loud noise Repetitive motion Sharp objects/edges			
Section 3. Supple Indicate	-	ocumentation lementary documents h	nave bee	n included wit	th the Permit	request.			
Permit certificate – A Permit Certificate must be used in conjunction with the Permit form to provide assurance that all reasonable and practicable steps have been taken to mitigate risks.		in – Is this work notifiable to WorkSafe?	- If so, when were they notified?		Amended Emergency Response Plan - If the Work interferes with existing Emergency Response Plans, amendments to the plan must be included		Emergency Rescue Plan – Emergency Rescue Plans MUST be included when working at height or in confined spaces, and must list rescue equipment		
Job Safety Analysis – Include a completed and signed JSA to indicate risk assessment and mitigation processes		A – Provide a TMP if the v disrupt or noticeably	Traffic Management Plan Provide a TMP if the work may disrupt or noticeably increase traffic on the Camp/Base 		Asbestos Removal Control Plan - An Asbestos Removal Control Plan is required whenever work involves the removal of asbestos.		Asbestos pre-work checklist – An asbestos pre-work checklist is required whenever work may involve handling or disturbing Asbestos		
Sitemap – Maps/drawings/GPR results.		 Is a site alert required the Camp/Base and o 	Site Alert (24 hrs Notice) – Is a site alert required to inform the Camp/Base and other sites of the Permited work?		Training/Certification Confirmation - Where Hazard specific or operational training is required by workers, submit confirmation of training to the permit Issuer		Other		
Section 4. Worke	r Sign Off								
	this document	I confirm I have read and und on site and on the day, it con						-	
Name			Signature					Date	



Permit To Work - Issuer

Status:

Permit #:

		Permit #.					
Section 5 - Permit Authorisation – The permit is not valid until signed by both parties (unless issued remotely) and is current for one day only (9 hours) but may be revalidated							
Are there conflicts with Conflict Resolution:	other PTWs? Y	es No	Conflicting PTW #s:				
By signing below, the Pe	rmit Issuer confirms:		By signing below, the Permit receiver confirms:				
 I have personally inspected the worksite (remote Permits excepted). All NZDF DEI requirements for undertaking this work, as outlined in CHESS, have been appropriately addressed. The Permit Receiver has shared all information in relation to the hazards, risks, and controls relevant to the site as known to NZDF DEI currently. Isolation of Plant is completed (as required – task specific). Emergency Plan is appropriate for the risks. Adequate controls are included in the JSA. All workers under the Permit have signed onto the Permit. Work can commence (following the implementation of any outstanding hazard controls). Base Command and all affected site projects have been notified and consulted for possible conflicts. 			 I understand the precautions and agree to abide by the conditions specified in this Permit and related documentation. All hazard/risk controls outlined in this Permit are in place and will remain so for the duration of the work. I have personally explained to each of the Workers what the risks and controls are for work under this Permit, including emergency rescue plans. All personnel undertaking work under this permit are trained and competent to do so. Enquiries have been made of those completing the work whether they have any pre-existing medical conditions which may affect them during the work e.g. epilepsy, and if affected, what appropriate steps will be taken to manage the situation. 				
Permit Issuer (Name):			Permit Receiver (Name):				
Signature:			Signature:				
Date: Permit #			Date:				
Section 6 - Permit Sus revalidated for up to a The Permit Issuer Certifies:	maximum of five co	onsecutive days. The including the Permit Recei	it Issuer can suspend and revalidate the I ver remain unchanged. ntation of any outstanding hazard controls)	Permit. Work can be			
The Permit Receiver Certifies:	All a sussessed to a death bits a constant was to be a sustant and so the standard sectors.						
Suspended by:		Date/Time:	Revalidated by:	Date/Time			
Suspended by:		Date/Time:	Revalidated by:	Date/Time			
Suspended by: Suspended by:		Date/Time: Date/Time:	Revalidated by: Revalidated by:	Date/Time Date/Time			
				-			

Section 7. Permit Closure – Sign off when work is finished, revalidation periods have expired, or the permit is cancelled.

The Permit has been:	Closed		Cancelled						
Are all related permits closed?	Yes	No	N/A	Is the site clean, secure and ready for re-commission?			No	N/A	
Permit Issuer and Permit Receiver: - By signing below, the Permit Issuer and Permit Receiver certify the work described on this permit is complete and the permit is closed.									
Permit Issuer (Name):					Permit Receiver (Name):				
Signature:				Signature:					
Date:					Date:				