



Date:		Job Location	ı:			
Work/Task/Project Description:						
Company:						
Permit Receiver (Name):			9	Signed:		
Receiver Phone No. (Mobile):						
Permit Issuer (South Port Supervisor Name)		Signed			Close out	

PERMITS OVER 1 DAY (MAX 5 DAYS) (review with South Port Supervisor at start & end of each day)						
DATE:	/ /	/ /	/ /	/ /		
Receiver:	Sign Here	Sign Here	Sign Here	Sign Here		
Issuer:	Sign Here	Sign Here	Sign Here	Sign Here		
Daily close out						
Ensure all newly identified hazards and/or changes are communicated to the entire team						

General		Working on the roof		
Are weather conditions suitable (wind, rain etc)	Y / N	Are work positioning or fall arrest systems in place where roof pitch exceeds 15 degrees	Y / N	
Has area been signed & barricaded off from passing vehicles and to protect persons from entering area	Y / N	Are walkways, platforms or boards in place for work on fragile roofs (including within ceilings)	Y / N	
Do operators hold correct unit standard training	Y / N	Are work positioning or fall arrest systems in place where work will be within 2m of the edge	Y / N	
Does equipment hold current inspection tag and has been inspected in good condition	Y / N	Are barriers or guard rails in place where work will be within 2 meters of edge	Y / N	
Will the work impact on neighbouring areas	work impact on neighbouring areas Y / N Are voids or skylights near work area barricaded		Y / N	
Are lanyards or other measures in place to prevent tools and equipment falling from heights	Y / N	Elevated Work Platforms (scissor lifts, man cages, cheery pickers etc)		
Is area free from other hazards such as power lines	Y / N	Does the EWP hold current certification	Y / N	
Harness/lanyard required or life vest if over water	Y / N	Does person hold qualification to operate EWP	Y / N	
Is a rescue plan required (print below)	Y / N	Harness & lanyard are worn	Y / N	
Ladders		Has gradient, height, access, load and ground surface been assessed when considering EWP type	Y / N	
Is the ladder AS/NZ standard, rated for industrial use, and in good working condition	Y / N	Scaffold		
Is the ladder barricaded/signed from vehicles or persons in proximity	Y / N	If fixed scaffolding it must be erected by a certified scaffolder / company	Y / N	
Is the ladder secured during use, and surface supporting ladder is secure	Y / N	If mobile scaffolding it must be erected by a competent person but cannot exceed 5 meters	Y / N	
Is ladder set to 4:1 ratio and extends 1m beyond step off point	Y / N	Is rechecked by certified scaffolder following severe weather, earthquake or impact from mobile plant	Y / N	
		Has gradient, height, access, load and ground surface been assessed when considering scaffold type	Y / N	

Other controls:	
Rescue Plan:	

PRINT AND SIGN YOUR NAME IF YOU HAVE READ AND AGREE WITH THE PERMIT CONTENT					
Name	Signature	Name	Signature		

Roof Pitches for information purposes:				
Shed 1&2	11	R&D	6	
Shed 3	11	Forklift repair shed	20	
Shed 3A + 3B	7.5	Cold store 1	4.5	
Shed 3C Canopy	5	Cold store 2	6.5	
Shed 4	7.5	Cold store 3	5	
Shed 5	7	Cold store engine room	5	
Shed 6	12	Pneumatics Syncro shed	45	
Shed 7	19.6	South Syncro shed	30	
Admin building	12			
Higher pitched roofs requiring work positioning or fall arrest systems				