

5 Asbestos Removal					
5a	Refer to front page for PTW validity dates and times			Name	Signature
5b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
5c		All tradespersons have the required licenses to deal with asbestos	Y	<input type="checkbox"/>	
5d		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
5e		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
5f		All works will be in accordance with JSA	Y	<input type="checkbox"/>	
5g	RO	Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
5h		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
5i	CO	Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	

6 Crane Lift					
6a	Refer to front page for PTW validity dates and times			Name	Signature
6b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
6c		All tradespersons have the required licenses to applicable to their job	Y	<input type="checkbox"/>	
6d		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
6e		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
6f		All works will be in accordance with JSA	Y	<input type="checkbox"/>	
6g		Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
6h		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
6i	CO	Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	

7 Confined Space Entry and Gas Testing					
7a	Refer to front page for PTW validity dates and times			Name	Signature
7b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
7c		All tradespersons have the required licenses to applicable to their job	Y	<input type="checkbox"/>	
7d		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
7e		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
7f		All works will be in accordance with JSA	Y	<input type="checkbox"/>	
7g	RO	Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
7h		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
7i	CO	Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	

Note - MU will not generally allow entry into confined spaces wearing BA apparatus. Exceptional circumstances only.

8 Critical Protection Bypass (Fire Detection/Smoke Alarms)					
8a	Building	Fire zone(s) to be isolated			
8b		RO init		CO init	
8c		RO init		CO init	
8d		RO init		CO init	
8e				Name	Signature
8f	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
8g		I am responsible for contacting security 9360 6262 to isolate/deisolate	Y	<input type="checkbox"/>	
8h	RO	SIMOPS register checked for conflicting works	Y	<input type="checkbox"/>	
8i		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
8j	CO	Method statement/JSA reviewed approval to proceed	Y	<input type="checkbox"/>	

8k Refer to front page for PTW validity dates and times								
8l	Zone isolated by Security				Zone de-isolated by Security			
8m	Date	Time	Name	Sign	Date	Time	Name	Sign
8n								
8o								
8p								
8q								
8r								
8s								
8t								

Isolated zones **MUST** be reinstated/deisolated at the end of each working day.

Amendments must be initiated by RO and CO, the SIMOPS register checked, and the permit log updated by Helpdesk. Additional log sheets available at Helpdesk.

9 Electrical - Low Voltage Works and Isolations					
9a	Refer to front page for PTW validity dates and times			Name	Signature
9b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
9c		All tradespersons have the required electrical licenses	Y	<input type="checkbox"/>	
9d		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
9e		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
9f		All works will be in accordance with JSA	Y	<input type="checkbox"/>	
9g	RO	Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
9h		SIMOPS register checked for conflicting works	Y	<input type="checkbox"/>	
9i		Secondary impact assessed and stakeholders notified if applicable	Y	<input type="checkbox"/>	
9j		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
9k	CO	Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	

10 Electrical - High Voltage Works and Isolations					
10a	Refer to front page for PTW validity dates and times			Name	Signature
10b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
10c		All tradespersons have the required licenses to work with HV	Y	<input type="checkbox"/>	
10d		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
10e		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
10f		All works will be in accordance with JSA and switching program	Y	<input type="checkbox"/>	
10g	RO	Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
10h		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
10i		Method statement/JSA and switching program reviewed	Y	<input type="checkbox"/>	
10j	CO	HV access permit issued to WTL	Y	<input type="checkbox"/>	
10k		Approval to proceed	Y	<input type="checkbox"/>	

11 Excavations and Penetrations					
11a	Refer to front page for PTW validity dates and times			Name	Signature
11b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
11c		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
11d		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
11e		All works will be in accordance with JSA	Y	<input type="checkbox"/>	
11f		I am responsible for ensuring any buried services are not damaged	Y	<input type="checkbox"/>	
11g	RO	MU drawings and buried services SIS FM information provided to WTL	Y	<input type="checkbox"/>	
11h		Grounds manager notified	Y	<input type="checkbox"/>	N/A
11i		Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
11j		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
11k	CO	Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	

12 Hydraulic Works and Isolations					
12a	Refer to front page for PTW validity dates and times			Name	Signature
12b	WTL	I am sufficiently competent to carry out/lead/oversee the works	Y	<input type="checkbox"/>	
12c		All tradespersons have the required hydraulic licenses and training	Y	<input type="checkbox"/>	
12d		All actions and conditions necessary for safe work will be performed	Y	<input type="checkbox"/>	
12e		The JSA lists the names of all persons involved and is job specific	Y	<input type="checkbox"/>	
12f		All works will be in accordance with JSA	Y	<input type="checkbox"/>	
12g	RO	Certs of training/licenses reviewed, inductions confirmed	Y	<input type="checkbox"/>	
12h		SIMOPS register checked for conflicting works	Y	<input type="checkbox"/>	
12i		Secondary impact assessed and stakeholders notified if applicable	Y	<input type="checkbox"/>	
12j		Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	
12k	CO	Method statement/JSA reviewed, approval to proceed	Y	<input type="checkbox"/>	