**PERMIT TO WORK**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **M&E Access / Permit to Work** | | | | | | | | | | | |
| **CONTRACT** | | **PERMIT OPERATOR**  **AGILE ELECTRICAL LTD** | | | | **PERMIT NUMBER** | | | | | |
| Trade Contractor | | | | Location of Works | | | | | | | |
| Description of Works | | | | | | | | | | | |
| Permit requested work on | Electrical HV | | Electrical LV | | Mechanical | | | | Access | | Testing |
| Duration of Works: From.............….Hours on ....../....../...... Until …………Hours............./....../....... | | | | | | | | | | | |
| **Precautions** | | | | | | | **Yes** | **No** | | **N/A** | |
| Has a risk assessment/method statement been prepared and approved?   1. Have all personnel involved been briefed on the requirements of 1 above? 2. Has all PPE been identified /issued? 3. Is area secure and lockable? 4. .Are there any risks to other persons? | | | | | | |  |  | |  | |
| Person requesting permit to work  Print name.................................Signature........................Pass no............................. | | | | | | | | | | | |
| Supervisor in charge of work  Print name.................................Signature........................Pass no............................. | | | | | | | | | | | |
| **Permit valid** From...............Hours on ....../....../...... | | | | **Permit valid** Until...............Hours on ....../....../...... | | | | | | | |
| **permission is hereby granted for the above work to proceed in accordance with the method statement/risk assessment and identified precautions & subject to the notes** | | | | | | | | | | | |
| Permit Issuer:  Print name.................................Signature........................Pass no............................. | | | | | | | | | | | |
| Permit authorisation for power on:  Print name N/A Signature N/A Pass no N/A | | | | | | | | | | | |
| **THIS PERMIT MUST BE DISPLAYED IN A CLEAR WALLET AT THE WORK PLACE AT ALL TIMES WHILST THE WORK IS IN PROGRESS TOGETHER WITHASSOCIATED PERMITS, METHOD STATMEMENT AND RISK ASSESSMENT** | | | | | | | | | | | |
| **RENEWAL** | | | | | | | | | | | |
| **NEW EXPIRY DATE/TIME** | | **PERMIT ISSUER (NAME)** | | | | **SIGNATURE** | | | | | |
|  | |  | | | |  | | | | | |
|  | |  | | | |  | | | | | |
| **Works completed and area checked & made secure** Print name.................................Signature........................ | | | | | | | | | | | |
| **CANCELLATION OF THIS PERMIT** | | | | | | | | | | | |
| **Work acknowledged as completed** Print name.................................Signature................................. | | | | | | | | | | | |