

Form	HITACHI
<h2 style="margin: 0;">SAFETY PERMIT EXCAVATION FORM</h2>	

Permit to Work Number:

Part 1 – General Details (to be completed by Requesting Party)

Work Description			Date		
Schedule Start & Finish <i>dd/mm/yyyy</i>	Start:		Working Period	<input type="checkbox"/> Engineering Hours	
	Finish:			<input type="checkbox"/> Revenue Services Hours	
Type of Work	<input type="checkbox"/> Inspection <input type="checkbox"/> Maintenance <input type="checkbox"/> Installation <input type="checkbox"/> Testing <input type="checkbox"/> Training <input type="checkbox"/> Other (specify)				
Work Description					
Work Location	Track	From (Chainage)		To (Chainage)	
	Station	From		To	
	Depot	Building Number		Room Number	
	Other Areas	(specify)			

PART 2 – Primary Hazards (Copy of this Permit must be stored on site until closed)

Description of the Works Include precise location relative to and building or tracks and what method of excavation and trench support is being used.

If necessary, insert own drawing/sketch or plan here:

W = MM

D = MM

L = MM

<i>Please Tick as applicable</i>	Yes	No	
Has area been CAT scanned or trial PIT been complete and available results on site?	<input type="checkbox"/>	<input type="checkbox"/>	If No, obtain results before starting excavation
Have all service been identified?	<input type="checkbox"/>	<input type="checkbox"/>	If No, do not dig and seek advice.
Is area of excavation clearly identified?	<input type="checkbox"/>	<input type="checkbox"/>	If No, do not dig and seek advice.
Is there and High Voltage Cables in the area of Excavation?	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, do not dig
Has the W = WIDTH D=Depth L=Length of excavation been indicated above?	<input type="checkbox"/>	<input type="checkbox"/>	If No, do not dig
Is excavation to be conduct by hand or machine?	<input type="checkbox"/>	<input type="checkbox"/>	Provide details
Where Services have been located, are they identified and protected?	<input type="checkbox"/>	<input type="checkbox"/>	If No do not dig. If Yes How are they protected?
Will the excavation have any impact to the safe operation of the Railway or Public and Emergency Access?	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, do not dig

Approved By:	<input type="checkbox"/> Director, Operations and Maintenance	<input type="checkbox"/> Department Manager	<input type="checkbox"/> Manager, HSE (Operations and Maintenance)
Signature:			
Date:			

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Part 3 – Authorization and Acceptance

This authorization signifies that the planning component of work activity has been completed and that the work is authorized to implement in accordance with the Method Statement and Risk Assessment. This permit is registered in the safety permit Register

Special Instructions

1. DOCUMENT TO BE KEPT BY LANDLORD UNTIL EXCAVATION IS CLOSED
2. SAFETY PERMIT MUST BE RETURNED WITH 24HRS of CLOSURE AND CANCELLATION AND RETURNED TO PERFORMANCE AND PLANNING ADMIN FOR RECORDS KEEPING

Approving Person

Position

Signature

Date

Part 4 – Approval to Implement (to be completed by On Site Coordinator of Work Site)

	WORK START		HAND BACK AND CANCELLATION	
	I confirm that I have verified the above information and ensured that the necessary precautions have been taken. It is safe to carry out the work as defined above and permit information has been explained to all workers involved. I accept responsibility for this work.		I Confirm that the work has been completed/partially completed*, checked by myself and the area left in a safe and tidy condition (*delete as appropriate)	
On Site Coordinator Name Number				
Company				
Contact No.				
Signature		Date & Time		Date & Time
Authorization Number				

Additional Notes regarding the excavation: