

Permit Issue Checklist

Permit Details

Permit Number*: _____

Type of Work Permit*: _____ Options: Hot Work, Confined Space, Electrical, Excavation, Working at Heights, Other

Job Location*: _____

Work Description*: _____

Start Date*: _____

Expiry Date*: _____

Permit Issuer Name _____

Permit Receiver/Responsible Person*: _____

Safety Checklist

- Risk Assessment Completed*
- Required PPE Identified & Available*
- Necessary Isolations / LOTO Applied*
- Permit Displayed at Work Site*
- Emergency Plan Communicated*
- Only Authorised Personnel Present*
- Work Area Secured / Barricaded*
- Atmospheric Tests Within Safe Limits*
- Fire Watch Assigned (if applicable)*
- Tools & Equipment Inspected*

Additional Comments: _____

Authorisation

Permit Issuer Signature*: _____ (Sign above)

Permit Receiver Signature*: _____ (Sign above)