

# Authority to Work Permit

BH – TDM 0437 361 901

AH – SOO 0418 120 854

Issued to Company:		Date Issued:	Notice #:
Issued to Name:		Expiry Date:	Contact #:
Signature of Person issued to:			Inducted: <b>Y/N</b>
Description of Works:			
Job Location (Precinct, Building):			Purchase Order #:
Plans Sighted: <b>Yes / No / NA</b>	SWMS Checked <b>Yes / No</b>	HAB staff Initials:	SWMS Job Ready: <b>Yes / No</b>
Task Assessment		Actions Required	
RISK	Y/N	Circle/Highlight if appropriate or insert if required	
Working Airside		ASIC-VIC-ADA-AUA-Roof-Radio-Escort-WSO	
Service Switching & Isolations, including FIP zones		Appropriate PPE, licences, Tag out, HV permit Req. Tenants notified	
Airfield Ground Lighting Isolation		Electrical license, Notam required, AGL maintenance team informed	
Working at Heights/RF & Roof access		Working at Heights notice, Understanding of HBA's EWP requirements	
Asbestos present		Check Reg.-Licenced- Appropriate disposal, stakeholders notified	
Working in Isolation		Is task high risk, is task A/Hrs in Terminal (Evac Plan), are phone calls required, is 4WD required	
Confined spaces		Confined spaces trained, ventilation required, Entry/Exit Reg. Appropriate number of people.	
Hot/Dust Work		Hot Works / Dust Notice - PPE	
Fire Protection System Impairment		Fire Protection System Impairment notice-not to be used for FIP zone isolations	
Chemicals		Spill Clean-up Kit-MSDS-PPE	
Lifting Equipment to be used		Notice-Isolation of Utilities-Barricade of area – PPE - stakeholder notified	
Obstacle Limitation Surface infringement		Online application and Approval -Yes / No If no, works will not proceed	
Working near moving machinery		Isolation Notice-Barricades-Traffic Management Plan -stop/slow	
Excavation or Surface penetration Vertical & Horizontal		Permit-Dial before you dig-Underground surface plans consulted-shoring-services in walls located	
Approval to carry Tools of Trade into Sterile Area		List Tools:	
ABC approval required/Other:			
Walkthrough / Handover		Is a Walkthrough or Handover required on completion of job/works (circle applicable in RISK column)	
HBA Use only			
Name and Signature			Date/Time
Issued and Approved By:		HIAPL Signature:	
Closed by:		Service Report: Yes/No	