

Job details

Special tools to be used

Job location/ Plant identification

Is any other work currently being undertaken that may interact or affect this permit?
(Quote permit numbers where applicable)

This permit is only valid when all sections are complete. If you are in doubt or don't understand, then please ask. Remember, all accidents are preventable and it is people who get hurt and suffer pain. Please use this permit in the spirit intended to protect yourself and others. Please ensure that you sign this permit-to-work.

Do not proceed with your work until your permit has been authorised by the relevant member of staff.

HAZARDS AND PRECAUTIONS TO BE TAKEN

PRIMARY HAZARDS - fumes, electrics, gases, liquids, sludge, radiation, moving parts

Substance type(s)

COSHH Hazard Group

Quantities involved

Storage arrangements

PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY	Yes	No
Are you trained/qualified to undertake this work?		
Are you fit/healthy to undertake this work?		
Has an assessment of health and safety risks been made?		
Have you received all necessary information/instruction?		
Are adequate control measures in place for substances with WELs?		
Will these controls reduce exposure below the WELs?		
Are plans in place if control measures fail?		
Are there means for safe storage and disposal?		
Are there adequate provisions for eating, drinking, washing, clothing?		
Is Personal Protective Equipment necessary?		
Are you willing to accept any subsequent health surveillance?		

Other precautions required

AUTHORISATION AND ACCEPTANCE

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 the permit information has been explained to all workers involved. I accept responsibility for this work.

Person in charge

Company

Signature

Date

Authorized Person

Date

