

Manildra Group Safety - Form Penetration Permit



Section 1 – Details of work (Permit Recipient to complete)

Site name		Work Order #	
Location on site			
Details of penetration work to be undertaken			
Date		Start time	AM / PM
		Finish time	AM / PM
This permit is required to be completed for all penetrations that may impact on structural integrity, including penetrations into solid walls, ceilings and floors that: <ul style="list-style-type: none"> are deeper than 50mm and greater than 50mm diameter penetrate all the way through solid materials in walls, ceilings and floors. 			

Section 2 – Penetration checklist (Permit Recipient to complete)

All reasonable steps taken to identify, isolate and appropriately mark all hidden or concealed services in the vicinity of the penetration by:

Site plans reviewed
 Non-destructive testing
 Other:

The area affected by the penetration work (including any fall zones beneath floors etc.) has been barricaded and signs installed.	Y <input type="checkbox"/> N/A <input type="checkbox"/>
Coring/cutting greater than 50mm diameter is being made in a reinforced concrete wall, ceiling or floor or otherwise impact on structural integrity – if yes structural assessment required.	Y <input type="checkbox"/> N/A <input type="checkbox"/>
Engineer name: _____ Signature: _____ Date: _____	
Any reinforcements in the vicinity of the penetration have been positively located.	Y <input type="checkbox"/> N/A <input type="checkbox"/>
Additional risk controls, instructions or information:	
<p>HOLD POINT FOR PENETRATION</p> <p><i>Penetration cannot proceed until the Manildra Supervisor has been consulted to confirm applicable service location requirements have been satisfied.</i></p> <p>Consultation with the Manildra Supervisor has occurred (record details below). Y <input type="checkbox"/></p> <p>Mechanical excavation has been authorised to proceed. Y <input type="checkbox"/></p> <p>Name of Manildra Supervisor consulted: _____ Signature: _____ Date & time of consultation: / / : am / pm</p> <p>Comments:</p>	

Section 3 – Verification of risk controls (Permit Recipient to complete)

I confirm that actions and risk controls required in Section 2 have been implemented for the work to be undertaken as described in Section 1.

Note: This permit is activated at the time the permit recipient signs section 3 and remains valid for 24 hours.

Permit recipient name	Signature
Date	Time

Section 4 – Completion of work (Permit Recipient to complete)

I confirm that the work detailed in this permit has been completed in accordance with the requirements of this permit and that all waste, plant, tools and equipment have been removed from the work area and that the work area has been left in a safe condition.

Permit recipient name	Signature
Date	Time