

# ACCESS & ISOLATION PERMISSION TO WORK FORM



The purpose of this Access & Isolation Permission to Work (PTW) is to ensure that adequate controls are implemented and affected stakeholders are notified. All work is to comply with relevant legislative and Flinders University requirements.

**Note: 2 days' notice required for fire systems isolation & 10 days' notice required for services isolation Permission.**

Document Control Reference - BPWHS-24

Permission to Work (PTW) Number	
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(Flinders Uni to complete)

**In the event of an Emergency, all PTW's are immediately suspended. All persons must assemble at the nearest nominated assembly point. The PTW must be re-authorised (Signed) by the PTW Issuer {Consult on this title} before work resumes. Fire isolations are not permitted to remain overnight without written authorisation.**

## 1. CONTRACTOR DETAILS

Company undertaking the work:			
Person undertaking the work & phone number:		Supervisors name & phone number	
Principal Contractor Company:			
Principal Contractor Contact name & phone number:			

## 2. LOCATION

Location of Work: (inc. Campus/Building/Room):		Level and Room number	
Planned Work Activity:			
Estimated Duration of the PTW:	Date From		Time from
	Date to		Time to

## 3. ISOLATION DETAILS

Isolation type	<input type="checkbox"/> Electricity <input type="checkbox"/> Gas <input type="checkbox"/> Water <input type="checkbox"/> Mechanical <input type="checkbox"/> Fire Suppression <input type="checkbox"/> FIP		Other:
Document areas and equipment inclusive of research activities that will be affected by the isolation			
Document systems, circuits or fire system zones that require isolation (attach relevant documentation)			

## 4. WORK DETAILS – ELECTRICAL ISOLATION

Document areas/circuits that will be affected by the isolation/s			
Document point of isolation		Voltage Type	<input type="checkbox"/> High Voltage <input type="checkbox"/> Low Voltage
<b><i>I agree NOT to access behind the escutcheon panel</i></b>		<input type="checkbox"/> YES Complete Section 6	
		<input type="checkbox"/> NO (Require access for this task) Complete Sections 5 - 7	

## 5. REQUIREMENT FOR SWMS

The person in direct control acknowledges that the items related to PTW (below) have been considered and included in the attached SWMS/JSA. All items must be ticked or marked N/A ( or N/A)

General	✓or N/A		✓or N/A
Will the Isolation affect stakeholders? If yes (✓) who is responsible for consultation and notification?		Signed Job specific SWMS attached	
		Lock out/Tag out procedures are in place for isolation of affected plant & infrastructure?	
<input type="checkbox"/> Flinders Uni	Name:	Plant and equipment to be used is identified? Pre start inspections & PPE must be referenced as controls	
<input type="checkbox"/> Contractor	Name:	Process in place for the safe reinstatement of isolated areas?	

<b>Electrical</b>		<b>Fire Safety Systems Isolation requirements</b>				
Electrical infrastructure & associated hazards are identified including area clear of wet conditions, combustible and flammable materials?		Daily reinstatement of fire safety systems is required?				
For work adjacent energised infrastructure a risk assessment has been completed justifying the need for the work and there is a trained safety observer present at all times who is competent in low voltage rescue?		Extent of fire safety system isolation has been identified and emergency controls considered/implemented?				
<b>6. PTW REQUEST (PTW Holder)</b>						
This acknowledgement signifies a formal request to commence activities involving one or more specified high-risk works. I request this PTW be acknowledged and registered by the relevant Flinders University PTW Issuer. As the person requesting this PTW, I hereby certify that:						
<input type="checkbox"/>	I shall implement all planned and necessary controls to ensure the health and safety of all persons who may be affected by the activities.					
<input type="checkbox"/>	I shall monitor the identified hazards and control strategies throughout the work activities.					
<b>PTW Holder</b>		<b>Signature</b>	<b>Date: Time:</b>			
<b>7. PRINCIPAL CONTRACTOR/PCBU CONTRACTING THE WORK TO THE PTW HOLDER</b>						
As the Principal Contractor (where someone other than the University has engaged the PTW Holder)/ PCBU (where the University has engaged the PTW Holder) commissioning the work, I have reviewed the attached SWMS/JSA (and kept a copy) for the work covered by this PTW.						
<b>PCBU/Principal Contractor Rep:</b>		<b>Signature</b>	<b>Date: Time:</b>			
<b>8. STAKEHOLDER NOTIFICATION (Authorised person to complete)</b>						
<b>Stakeholder Affected by the isolation work</b>						
<b>Areas Notified</b>	Faculty/School/College	<input type="checkbox"/>	Campus Operations	<input type="checkbox"/>	Security	<input type="checkbox"/>
	Legal and Risk	<input type="checkbox"/>	Fire Wardens (s)	<input type="checkbox"/>	IST	<input type="checkbox"/>
	Other (Provide Description)					
<b>9. FLINDERS UNIVERSITY PTW ISSUER</b>						
The above criteria have been addressed and the work is authorised to commence in accordance with the SWMS / JSA and identified control measures. As the Flinders University Permit Issuer, I hereby acknowledge that:						
<input type="checkbox"/>	I have allocated this PTW a number on the BPRS.					
<b>PTW Issuer</b>	<b>Flinders University</b>	<b>Signature</b>	<b>Date: Time:</b>			
<b>10. CLOSE OUT</b>						
As the PTW Holder, I hereby acknowledge that:						
<input type="checkbox"/>	All Isolations have been removed and/or reinstated, all workers have vacated the space and the area has been left in a safe, secured and compliant condition. Plans/Drawings and legends are updated and provided to the Flinders University representative including new infrastructure and disconnected services					
<b>PTW Holder</b>		<b>Signature</b>	<b>Date: Time:</b>			
As the PTW Issuer, I authorise the closure of this PTW and will close the BPRS request and file this document:						
<b>PTW Issuer</b>		<b>Signature</b>	<b>Date: Time:</b>			