



## Working at Heights / Roof Access

### Part 1 – Hazard Assessment

This assessment and permit is to be completed prior to any work being undertaken: within 2 metres of any roof edge (unless a suitable permanent edge protection system exists); or where the use of fall protection equipment is required; or where Elevating Work Platforms are to be used; or where scaffolding is erected.

#### Mandatory Precautions

For access or work within 2 metres of edge of flat roof, safety measures shall be used, such as:

- Permanent Edge System or a Travel Restriction Device
- Elevating Work Platform
- All personnel required to use Fall Protection, Fall Arrest and Travel Restriction Devices must be trained and assessed as competent in their use. All harnesses, lanyards, safety-ropes, safety-line gliders and associated equipment are to be visually inspected for damage prior to use. Travel Restriction Devices must carry in-date test tags.
- Elevating Work Platforms (EWP) or similar devices must hold and produce a current certificate of competency prior to use. Personnel working from the EWP are to wear harnesses tethered to the EWP by a lanyard of sufficient length to prevent movement outside of the platform enclosure safety-rails. Personnel operating beneath an EWP must wear hard-hats. All EWP's are to be placed on solid and level ground. All EWPs or similar devices operating in areas which may present a hazard to the general public, must be barricaded a minimum of 3 metres from the equipment using high-visibility bunting, cones, flags or tape.
- All scaffold (either fixed or temporary) from which a person could fall more than 4 metres, must have an appropriate safety inspection tag attached, signed by a *competent person* as defined under **WHS Regulation 225 and Code of Practice – Managing Risk of Fall in the Workplace** and must be inspected regularly, in any event at intervals not exceeding 30 days. All scaffolds are to be erected on solid ground and footings inspected for security before each use. Scaffolding must carry prominent warning signage advising that access is restricted to authorised persons only. Scaffolding work platforms must comply with AS/NZS 4576 Guidelines for Scaffolding, and AS/NZS 1576

For access or work more than 2 metres

- Weather conditions are to be taken into account prior to any work commencing (wind speed/direction, wet or hot conditions in particular).
- All areas to be kept clear of tools and equipment not currently in use, tripping hazards and debris.
- All personnel to wear footwear that minimizes the risk of slipping.
- All tools to be carried in a toolbox, tool bag, tool-belt or similar to reduce the risk of dropping items. Tools to be tethered to scaffolds and EWPs whilst in use.
- Where no roof walkway exists, all personnel working on or from a roof are to place their feet on secure sections of roofing. Where possible, walking along lines of screw-fixings is the preferred traversal route.

Other Hazards/Issues Identified	Actions Required

Assessment undertaken by:	
Name:	
Company/University Department:	
Signature:	Date:



# Working at Heights

## Part 2 – Permit

TASK DETAILS	
Date	Description of Work
<b>Company/Department undertaking work</b>	
Building/Area	Equipment Requirement
	Elevating Work Platform <input type="checkbox"/>
	SALA Travel Restriction Device <input type="checkbox"/>
	BULLIVANTS Travel Restriction Device <input type="checkbox"/>
	Anchor Point System <input type="checkbox"/>
	Erected Scaffold <input type="checkbox"/>
Work Supervisor	Work Party
<p>I confirm that all hazards have been identified and all relevant precautions, per Hazard Assessment, have been implemented prior to working at heights commencing.</p> <p>I confirm the work party have the appropriate training and qualifications to carry out the work and operate or use the equipment indicated on this permit.</p> <p>Name: _____</p> <p>Signed: _____</p>	<p>Name: _____</p> <p>Name: _____</p> <p>Name: _____</p> <p>Name: _____</p> <p>Name: _____</p> <p>Name: _____</p> <p>Name: _____</p> <p>Name: _____</p>

AUTHORISATION	
Permit Valid for period:	Authorised by:
Time(s): _____	Name: _____
Date(s): _____	Signed: _____
	Position: _____
Notes and additional instructions	

COMPLETION	
Work Supervisor	Completion Accepted By:
<ul style="list-style-type: none"> <li>All Working at Heights is complete.</li> <li>Area has been cleaned of all debris.</li> <li>All signage has been removed.</li> <li>All equipment checked and returned to store.</li> </ul> <p>Name: _____</p> <p>Signed: _____ Date: _____</p>	<p>Name: _____</p> <p>Signed: _____ Date: _____</p> <p>Position: _____</p>

**Completed Permit is to be kept on file for a period of 12 months**