

Permit Serial Number		Date	
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Entries should be clear and legible. Abbreviations and references should be used consistently. Where required a space for a drawing / sketch is on Page 7 of the form.

Part 1: General

Unit / Establishment / Site / Platform			
Person in Charge			
Location of Task			
Activity			
Validity of Permit to Work	From (Time HHMM)		Date
	To (Time HHMM)		Date

Have alternative ways of working been evaluated and documented prior to requesting this Permit to Work? (Please detail)

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Part 2: Task to be carried out (Description of the equipment or system and activity or tasks to be carried out)

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Part 3: Cross-referenced documentation (List all associated risk assessments, PTWs, Safe Systems of Work (SSW), Method Statements or Maintenance Procedures)

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Part 4: Hazard identification and control measures

The following residual hazards exist or have been introduced to this task and the listed control measures are to be implemented (in accordance with [Chapter 8](#) (Safety Risk Assessment and Safe System of Work) of JSP 375, Volume 1. Entries should be recorded clearly and concisely to minimise the risk of error.

Hazard:	Control Measure(s):

Part 4a: Isolations and Energy Control (must be completed where isolation is required)

Isolation Type (Mech / Elect / Process / other)	Isolation Point / ID	Method (LOTO / Spade / Blank / Other)	Applied by	Verified by Sanctioning Officer	Common to other permits? (Ref No. / N/A)

Part 4b: Gas Testing and Atmosphere Monitoring (if applicable)

Test Type / Parameter	Safe Limit / Units	Reading	Time / Date	Expires at	Tester	Re-test interval

Part 4c: Personal Protective Equipment (PPE) / Respiratory Protective Equipment (RPE)

Required PPE / RPE	Specification / Standard	In place (Y/N)	Checked by

Part 4d: Special Precautions and Tools/Equipment

Special Precaution	Detail (barriers, fire watch, communication arrangements, standby person, ventilation and so on)	In place (Y/N)	Checked by

Part 4e: Emergency Arrangements

Emergency procedure / rescue plan	Equipment, alarms & communications (location, tested, including alternative / non-verbal arrangements where required)

Part 4f: Simultaneous Operations / Interacting Permits

Related Permit No.	Interaction / Hazard	Controls / Cross-reference	Coordination Confirmed by Sanctioning Officer	Date Confirmed

Part 5: Authority to proceed by sanctioning officer

I have reviewed all aspects of the task / activity and am satisfied that the arrangements as detailed in the SSW or Method Statement have been put in place and certify that that the task / activity detailed in Part 2 of this PTW is authorised to proceed.

Signed		Name	
Rank / Grade		Role	
		Date	
		Time	

Part 6: Acceptance by the Person in Charge

I certify that I am competent to carry out the 'Person in Charge' function. I have read and fully understand the documentation associated with the task / activity as listed in Part 3 of this PTW. I am satisfied that those personnel who will be employed on the task are properly equipped, understand the safety and emergency procedures to be followed, understand the communication methods to be used during the task, and are competent to carry out the task.

Signed		Name	
Rank / Grade		Role	
		Date	
		Time	

Part 6a: Permit Display / Posting Declaration

Displayed at point of work (or nearest practical location)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Copy held at control / coordination room	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Copy held by Sanctioning Officer	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Checked by			Date	

Part 7: Task / activity completion / stopped by the Person in Charge

I certify that the task / activity detailed in Part 2 of this PTW has been:

- | | |
|---|--------------------------|
| a. completed | <input type="checkbox"/> |
| b. stopped or suspended. The task / activity was stopped/ suspended at hrs on (date) . Details of the reasons for stoppage/suspension are detailed at part 9 complete with details of what arrangements have been put in place to make safe and isolate and prevent all unauthorised access to the activity/process. | <input type="checkbox"/> |

Signed		Name	
Rank / Grade		Role	
		Date	
		Time	

Part 7a: Shift Handover / Extension

Confirm communication and handover arrangements, including alternative methods where verbal communication may not be effective:

Person in Charge		Signed		Date	
New Person in Charge¹		Signed		Date	
Reason for Handover / Extension			New Date Expiry		New Time Expiry
Sanctioning Officer		Signed		Date	

Part 8: Sanctioning Officer's declaration

I certify that this PTW is closed and that the task / activity detailed in Part 2 of this PTW has been:

- | | |
|---|--------------------------|
| a. completed at hrs on (date) . | <input type="checkbox"/> |
| b. stopped or suspended. I concur that the task was stopped / suspended for the reasons detailed at Part 9 and agree with the arrangements that have been put in place to prevent unauthorised access. This PTW is now cancelled, and all further work will be authorised on a new PTW. | <input type="checkbox"/> |

Signed		Name	
Rank / Grade		Role	
		Date	
		Time	

¹ Only to be completed in case of shift handover.

Part 9: Task / activity stopped / suspended by the Person in Charge

The task as detailed in Part 2 of this PTW has been stopped / suspended for the reasons listed:

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The following arrangements have been put in place to make safe and prevent unauthorised access to the work area, and interested parties notified of any safety-related implications of the work stopping, for electrical supplies or other services remaining isolated:

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Certified by the Person in Charge

Signed		Name	
Rank / Grade	Role	Date	Time

Drawing / sketch - To add a drawing/sketch, use the Word version or save an image in a separate file with this PDF form.

