

PILBARA PORTS EXCAVATION & PENETRATION PERMIT



This permit must be fully completed before any Excavation or Penetration work is to be undertaken.

Any near miss or incidents must be reported to a Pilbara Ports Responsible Person immediately.

APPLICATION DETAILS	
Date:	Work Order Number:
Person Submitting Application:	Contact Number:
Company Undertaking Works:	
Company Site Supervisor:	Contact Number:
Pilbara Ports Department works being conducted for:	
Pilbara Ports Contact Name:	Contact Number:
Site Location:	Work Area:
TYPE OF WORKS	
<input type="checkbox"/> Excavation	<input type="checkbox"/> Penetration
<input type="checkbox"/> New Installation	<input type="checkbox"/> Repairs/Maintenance <input type="checkbox"/> Exploration/Testing
SCOPE OF WORKS	
TYPE OF EQUIPMENT TO BE USED	
<input type="checkbox"/> Shovel	<input type="checkbox"/> Excavator <input type="checkbox"/> Hand or Motorised Post-Hole Digger
<input type="checkbox"/> Vacuum Excavator	<input type="checkbox"/> Backhoe <input type="checkbox"/> Core/Hammer Drill
<input type="checkbox"/> Post/Picket Driver	<input type="checkbox"/> Other:
SERVICE BEING INSTALLED, INSPECTED OR REPAIRED	
<input type="checkbox"/> HV Electrical	<input type="checkbox"/> LV Electrical <input type="checkbox"/> Phone <input type="checkbox"/> Fibre
<input type="checkbox"/> Potable Water	<input type="checkbox"/> Process water <input type="checkbox"/> Wastewater <input type="checkbox"/> Storm water
<input type="checkbox"/> Hydrocarbon	<input type="checkbox"/> Other:
WORKS BEING CONDUCTED IN AN OPERATIONAL AREA	
Terminal Operations have been notified of the works being conducted in an operational area under their custody and have approved the works <input type="checkbox"/> Yes <input type="checkbox"/> No	
Terminal Operations Approver:	Approval Given: <input type="checkbox"/> Written <input type="checkbox"/> Verbal
PERMIT CONTROL CHECKLIST	

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TASK	YES	N/A	TASK	YES	N/A
Are there services within the area where works is to be conducted	<input type="checkbox"/>	<input type="checkbox"/>	Method of communication is available and operational	<input type="checkbox"/>	<input type="checkbox"/>
Has service locating taken place and services verified? Note: Services are to be marked with a durable and nonconductive marking for the duration of the works.	<input type="checkbox"/>	<input type="checkbox"/>	All personnel involved aware of their responsibilities including spotters	<input type="checkbox"/>	<input type="checkbox"/>
Has underground services location data been obtained?	<input type="checkbox"/>	<input type="checkbox"/>	Have Pilbara Ports mapping team been notified of excavation works?	<input type="checkbox"/>	<input type="checkbox"/>
Is the depth of excavation going to exceed 150mm? Estimated Depth –	<input type="checkbox"/>	<input type="checkbox"/>	Risk assessment has been completed and signed by all personnel	<input type="checkbox"/>	<input type="checkbox"/>
Will Shoring/Benching be required	<input type="checkbox"/>	<input type="checkbox"/>	Isolations have been performed and checked/Verified	<input type="checkbox"/>	<input type="checkbox"/>
Is Shoring equipment available and at work area	<input type="checkbox"/>	<input type="checkbox"/>	All personnel have isolation locks and aware of isolations	<input type="checkbox"/>	<input type="checkbox"/>
Will the proposed work result in material being excavated and removed from the excavation site?	<input type="checkbox"/>	<input type="checkbox"/>	Has the work area been barricaded, sign posted and screened off?	<input type="checkbox"/>	<input type="checkbox"/>
Are Pickets or Stakes being driven deeper than 150mm (Not to be within 500mm of known services)	<input type="checkbox"/>	<input type="checkbox"/>	Are any other permits required (Confined space/Hotworks etc.)	<input type="checkbox"/>	<input type="checkbox"/>
If Excavation is planned for working within 50mm of a live service, the relevant manager has approved the excavation and consulted the Excavation and Penetration procedure	<input type="checkbox"/>	<input type="checkbox"/>	Service Drawings received, Reviewed and on hand	<input type="checkbox"/>	<input type="checkbox"/>
For buried services within 500mm mechanical excavation and conductive items will not be used (e.g. star pickets/steel stakes etc.)	<input type="checkbox"/>	<input type="checkbox"/>	Drawings provided show actual works being conducted including Installation details and route	<input type="checkbox"/>	<input type="checkbox"/>
If penetrating a wall/Ceiling/floor will the depth be greater than 25mm Estimated Depth –	<input type="checkbox"/>	<input type="checkbox"/>	Has a Rescue plan been developed and Personnel aware of the plan and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>
If penetrating a wall/ceiling greater than 25mm have services in the wall/ceiling/floor been located and confirmed	<input type="checkbox"/>	<input type="checkbox"/>	Horizon Power notified and aware of location and work being performed	<input type="checkbox"/>	<input type="checkbox"/>
SERVICE LOCATION CONFIRMATION					
<input type="checkbox"/> Service Drawings <input type="checkbox"/> Survey <input type="checkbox"/> Vacuum Pot holing <input type="checkbox"/> X-ray/Scan <input type="checkbox"/> Ground Penetration Radar <input type="checkbox"/> Other:					
ADDITIONAL CONTROLS AND WORKING NOTES					

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PERMIT APPROVAL			
Duration of Excavation/Penetration:			
Start Date:		Time:	
End Date:		Time:	
As the Permit Holder I am aware of my responsibilities and will complete all duties as listed on this permit, if the scope of work changes, I will cease the work and reevaluate the controls and implement new controls as required.			
Permit Holder	Date:		Time:
Name:		Signature:	
As the Permit Authoriser I have reviewed the Scope of Works, risk assessment, Service location details and the controls for this work. I authorise this work to commence and that the Permit holder is aware of their responsibilities and accountabilities for the works being conducted			
Permit Authoriser	Date:		Time:
Name:		Signature:	
PERMIT HOLDER TRANSFER			
Permit Holder Name	Date/Time Sign Off	Date/Time Sign on	Signature

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PERMIT SUSPENSION, CANCELLATION OR COMPLETION			
The work outlined in the permit was: Completed <input type="checkbox"/> Cancelled <input type="checkbox"/> Suspended <input type="checkbox"/>			
Has any alteration to existing services, or installation of new service location data been captured and passed on to the Mapping and Data Team via Mapping.data@pilbaraports.com.au Completed <input type="checkbox"/> N/A <input type="checkbox"/>			
Comments:			
Permit Authoriser:	Date:	Time:	
Name:	Signature:		
Permit Holder:	Date:	Time:	
Name:	Signature:		
PILBARA PORTS REFERENCE DOCUMENTS			
Pilbara Ports Confined Entry Procedure Pilbara Ports Confined Entry Permit Pilbara Ports Hotworks Procedure Pilbara Ports Hotworks Permit Pilbara Ports Excavation and Penetration Procedure Pilbara Ports Hazard Management Procedure Pilbara Ports Isolation and Tagging Procedure Pilbara Ports Demarcation and Barricading Procedure Pilbara Ports Incident Management Procedure			

DOCUMENT OWNER

The General Manager Terminal Operations is responsible for this form.