

FORM	
S05	

PERMIT TO WORK AT HEIGHT OR OVERSIDE

VESSEL		
DATE		
PERMIT NO. (PW-AO-yy-xxxx)	PW-AO	

Α		REQUIREMENT								
In order to ensure the safe and healthy operation of vessels under our management, the company requires that a Permit to Work is issued for any work where this is a risk of fall injury, when working at heights in excess of 1.8m above deck or when working over the ships side. This permit is not required when rigging accommodation ladders or pilot ladders, provided the requirements of MSMS are otherwise followed at all times. This permit can only be issued for a maximum period of 12 hours. If the working conditions change during the work period, then										
		comes invalid and								,
В				,	WORK	SCOF	PE			
Locati	on									
	iption of	work:								
Validit	•		FROM	DATE:				TIME:		
(MAX.	. 12 HOL	•	TO	DATE:	1			TIME:		
5	Enc	Enclosed Space Entry					High Voltage Work			
Tasks:	5 Hot	Hot Work				Work on Pressure Pipelines/ Vessels				
sks	Col	Cold Work				Underwater Operations				
Tasks:	Wo	Work at Height/ Overside				Other:				
	, Wo	Work on Deck In Adverse Weather				Other:				
)	Ele	ctrical Work				Othe	er:			
Port P	ermissio	on Required:	Yes & Obtained	/ No /	Not App	licable	1			
		ponsible Officer								
(ey Personnel:	Wo	rk Team Leader								
son	2									
Pers) - -									
ey F	Tea	Team Members								
Š	_									
If an e	external	Contractor is invol	ved, provide deta	ils:						
	,									
С	C PERMIT									
_		L confirm that al	l of the actions requ	ired by Sact			Nama & Cier	noturo.	Date & Time:	
•	onsible fficer	this permit have	r of the actions requ e been properly coi rk can be completed	mpleted, an			Name & Sigr	iature:	Date & Time:	
I have been briefed by the Responsible Officer and know what Namo & Signature. Data & Timo				what						

ricap	OHSIDIC	this permit have been properly completed, and am satisfied				
Of	fficer	the planned work can be completed safely.				
		I have been briefed by the Responsible Officer and know what	Name & Signature:	Date & Time:		
To	eam	actions I need to take to carry out the task safely. If the	G			
Le	ader	conditions change, or if work becomes unsafe I will stop work				
		without delay.				
PERMIT ISSUED ONLY WHEN SIGNED BY BOTH RESPONSIBLE OFFICER AND TEAM LEADER						
D	D CANCELLATION OF PERMIT					

D		CANCELLATION OF PERMIT						
Th	This permit is cancelled automatically if conditions change. In any other case it must be cancelled on completion of work.							
Responsible Officer		I confirm that work has stopped and that all people, equipment and material has been removed from the work site. I further confirm that any locked/ tagged out (LOTO) equipment or systems has been released.	Name & Signature:	Date & Time:				
		equipment of systems has been released.	PERMIT CANCELLED C	NCE SIGNED				



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# Actions (To be completed by Responsible Officer and Team Leader) RESP. OFF. INITIALS ODNE N/A 1 Risk assessment done and risk reduction actions taken as per hazards identified Toolbox talk been carried out. 1 Coolbox talk been carried out. 2 Toolbox talk been carried out. 3 Cooffirm that sak not interfering with any other permit to work in force. 4 Duty officer informed. 8 Warring notices posted. 8 Response of Requirement in good order. 9 Note: Such as Bosun's chairs, stages, gantlines, safety harmesses, lifelines, etc., 10 An attendant designated to oversee the working personnel. 10 Arrangement made for lowering for heavy parts such as scanners, motors etc. and checked that weight can be safely supported and forwed under full control. 10 Plan agreed and necessary equipment put in place to achieve an effective rescue? 11 Plan agreed and necessary equipment put in place to achieve an effective rescue? 12 Correct PPC provided to all Team Members, and all briefed on correct use: 13 Stately Helmet and safety harmess. 14 Buoyanny Adds (SOL AS Approved Inflatable Lifejackets) 15 Rational Prevention Arrast System with life line attached to a strong point 16 Other (Please specify). 17 Advise duty engineer Work near fore mast/ main mast/ radar scanners/ radio aerials/ satellite antennae: 18 Subadan and place notices to stop the use of radar and scanner/ radio/ satellite system/ ships whistles, as applicable. 19 Upt officer notified. 19 Necessary pollution prevention precautions taken for painting and other preparations. Lifetines wast, 10 Done N/A 2 Actions (To be completed by Responsible Officer and Team Leader) 8 Actions (To be completed by Responsible Officer and Team Leader) 10 Contact with extreme hot / cold temperatures 11 Sist from following energy sources identified: 12 Confirm isolation (LOTO) of above points: (To be signed by cF/7e or FTO only, then initiated by the Responsible Officer) 13 Confirm isolation (LOTO) of above points: (To be signed by cF/7e or FTO only, then initi	Е	PREPARATION AND SAFETY CHECKS		
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