# Explosive atmosphere area permit

AA/JSA/SOP Ref #:

Watercare

Company name

## Use for areas officially classified as explosive atmosphere areas

Reference: AS/NZS 60079.14:2009 – Explosive atmospheres – Electrical installations design, selection and erection

### Summary of work to be undertaken

Detail only the work to which this permit applies

Do other permits apply to this activity? Refer to the job sa	fety ana	lysis fo	rm (JSA)		
HOTWORK	azardous nergy	-	onfined Safety device Other (specify)		
Declaration by permit receiver					
• I am competent to identify and manage the risks related to this work permit (evidence of training provided)	Yes	No	<ul> <li>I have provided verification of competency training for carrying electrical work on intrinsically safe equipment</li> </ul>	Yes	No
<ul> <li>Is the work within the designated hazardous atmosphere area (see drawing).</li> </ul>		No	<ul> <li>I have identified all potential explosive gas release points including pipe connections,</li> </ul>	Yes	No
		NO	pumps, tanks and other equipment.	103	NO
• All other removable flammable materials have been	Yes	No	• All equipment used within the zone is intrinsically	Yes	No
removed from the worksite			safe		
<ul> <li>Gas monitors will be used throughout and work stopped if a gas alarm condition is reached</li> </ul>	Yes	No	<ul> <li>The nearest fire alarm and evacuation route have been located</li> </ul>	Yes	No
• Adequate ventilation is in place (tunnel work	Yes	No			
especially)					
Hazardous zone - emergency response p	olan				
In the event of an emergency, document or attach deta to be performed, including the individual steps that wi	ailed de ill need	scriptio to be u	on of how rescue is going Work activity existing risk sc ndertaken: Refer to		

Permit receiver validation

Name

Signature

I certify that I am aware of the planned work

met. I will ensure that others working under it understand and abide by the conditions.

and the controls detailed on this permit

and the JSA. I will ensure that work only proceeds when the conditions set out are

Refer to JSA Residual risk score: Refer to JSA

Verified risk score: Verified on site by the permit receiver

#### **Permit Suspension (PS) and Permit Revalidation (PRv):** The permit must be suspended at the end of each working day *OR* handover of shift; *OR* following an emergency; *OR* at the discretion of the PI and PR. The PTW MUST be revalidated prior to work recommencing.

Date	PS (✔)	PI (initial)	PR (initial)	PRv (✔)	PI (initial)	PR (initial)
DD/MM						
DD/MM						
DD/MM						
DD/MM						
DD/MM						

## Permit issuer

and the JSA.

from: until:

Name

Signature

I confirm this permit is now cancelled.

Permit issuer validation

The Permit to Work is allowed:

I certify that I have reviewed the proposed work

described on the Permit to Work documents

Name	PI cannot be same person as PR.	
Signature		D D / M M / Y Y Y Y Date

Date

## Permit receiver

Date

I confirm that work under this permit is concluded, and the worksite is left in a safe and tidy state.

Name PR c

ot be same person as Pl.

Signature

Date