

BP Potts Hill NSW, Training

Replace ID Sign Above Pump

The work you will be permitting:

- The contractor will be replacing the ID sign above the pump
- The main equipment the contractor will be using is an EWP, battery operated drill and angle grinder
- Due to the nature of the sign and the work required, the contractors have said they will be required to perform some work on top of the canopy
- The job will go for 2 days
- In order to undertake the work, the contractor requires a Work Permit, you will be the Permit Preparer.
- The contractor has provided you with their proposed SWMS to **review prior to the job (day)**

What you will be required to do:

Prior to the Day

- ☐ Commence preparation of the **ELECTRONIC** Work Permit Set including any required certificates and supporting documentation. (approximately 90% should be complete). The Electronic Work Permit Form is accessed from your WPCG profile. Do Not Validate any documents.
- ☐ Prepare the Isolation Plan and upload into the **ELECTRONIC** Work Permit (100% complete)
- ☐ Prepare the Traffic Management Plan and upload into the **ELECTRONIC** Work Permit (100% complete)

On the Day

- ☐ Finalise the required documents to make up the Work Permit set
- ☐ Finalise a Traffic Management Plan, upload into the **ELECTRONIC** Work Permit
- ☐ Finalise an Isolation Plan, upload into the **ELECTRONIC** Work Permit
- ☐ Finalise any of the contractors documents to support your Work Permit set
- ☐ Finalise the **ELECTRONIC** Work Permit

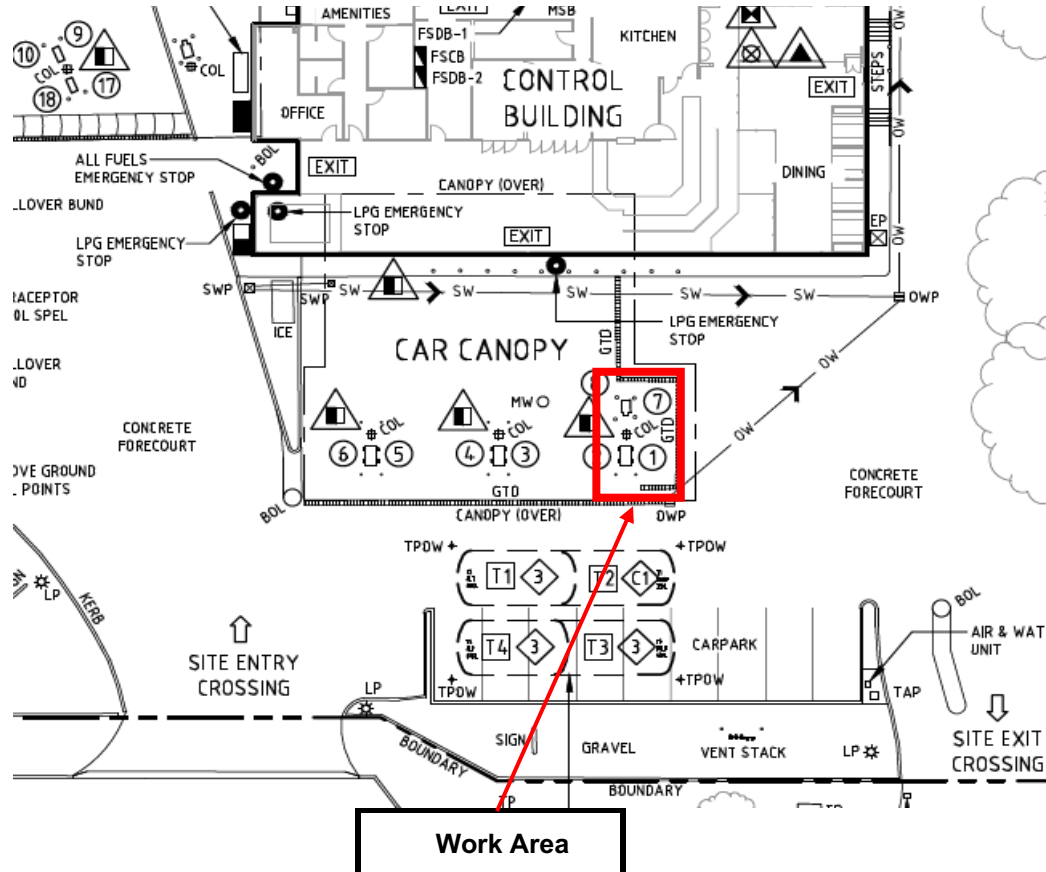
Roles

- Permit Preparer (Probationary Permit Officer) - Yourself
- Permit Officer - SC0136 Sean Crundall
- Permit Endorser - Yourself
- Permit Receiver- Someone in your group. Add on the day

Site Details

Site Name:	BP Potts Hill
Site Address:	155 - 157 Rockwood Rd Yagoona, NSW
Site ID	2887
Work Area Detail:	Forecourt, south side of car canopy above pumps 1 & 7

Site Images



Location of closest Emergency Department: Auburn Hospital

Location of closest emergency services: Lidcombe

Approximate response time: 6 mins

 Can rescue be undertaken onsite by trained personnel? ☒ Yes ☐ No

Indicate rescue equipment that will be provided:

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fibre rope (meets relevant standards) | <input checked="" type="checkbox"/> Auto-stop Descender | <input type="checkbox"/> Round sling |
| <input checked="" type="checkbox"/> Karabiner | <input type="checkbox"/> Triple Lock Karabiner | <input checked="" type="checkbox"/> Pre-rigged control descent device |
| <input checked="" type="checkbox"/> Rescue Knife | <input type="checkbox"/> Rescue stretcher | <input type="checkbox"/> Recovery pole |
| <input type="checkbox"/> Other? (Specify) | <input type="checkbox"/> Other? (Specify) | <input type="checkbox"/> Other? (Specify) |

Provide details of rescue procedure:

Fall from EWP:

A rescue person to be located on ground level at all times who has been trained in the use of the emergency override switch on the EWP. The emergency override switch is to be tested prior to work commencing. If worker has fallen from EWP and is suspended the rescue person is to lower the basket and worker to ground level. Once worker is at ground level, commence first aid and contact 000 if required.

Fall from roof:

If a worker has fallen from the roof and is suspended, use the EWP to recover the worker

Provide details of communication equipment that will be used: Verbal and Visual

Rescue personnel

Name: Dave Smith

Name:

First aiders

Name: Scott Williams

Name:

Documented rescue plan developed?

Y	N
<input checked="" type="checkbox"/>	<input type="checkbox"/>

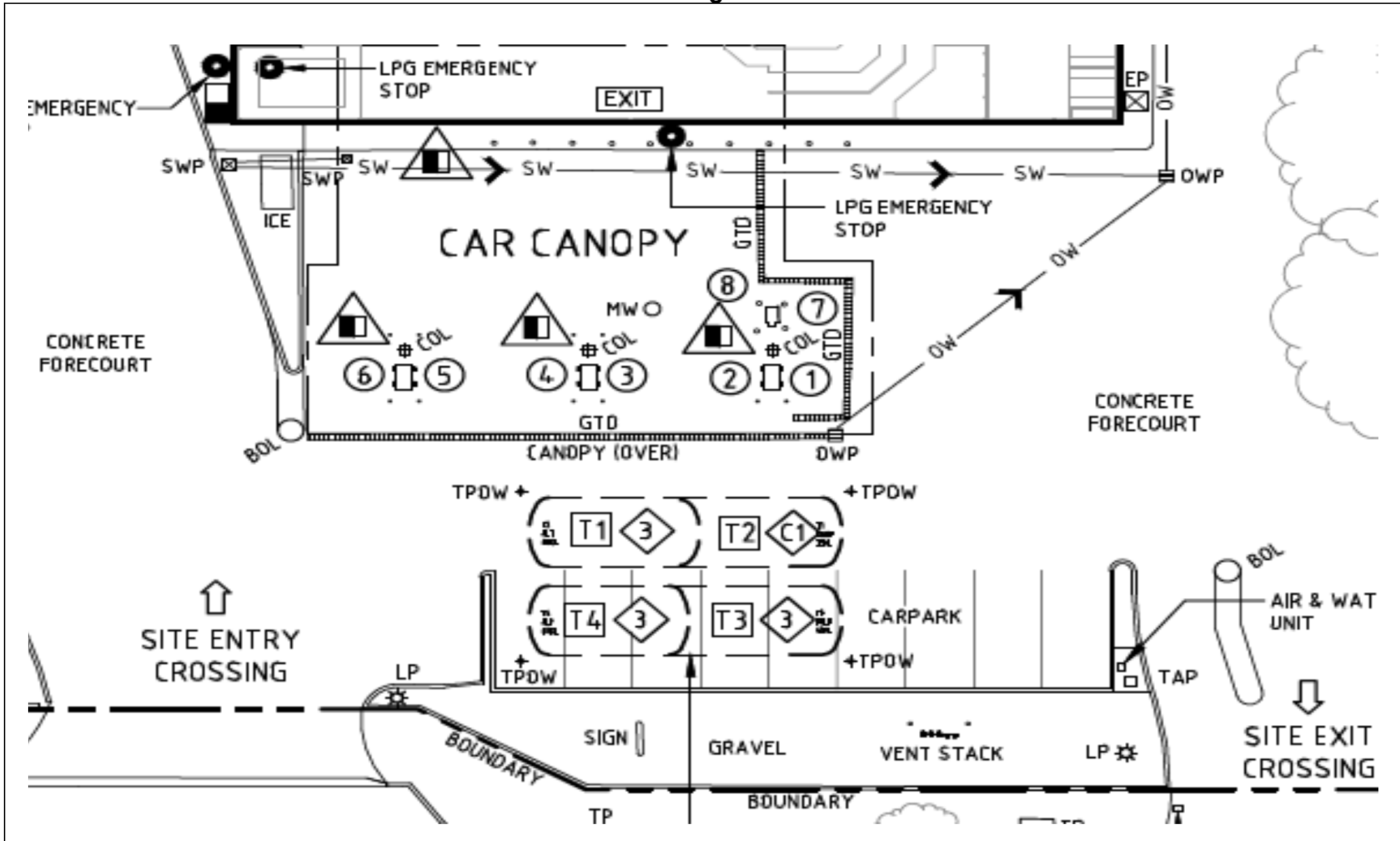
Documented rescue plan rehearsed?

Y	N
<input type="checkbox"/>	<input type="checkbox"/>

Documented Rescue plan accessible on site?

Y	N
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Traffic Management Plan



Heights Are Us Pty LTD**Isolation Record**

Isolation Record Number		Work Permit Number			
Isolation Information					
Plant or Equipment Being Isolated	Canopy lighting				
Purpose of Isolation	Replace pump sign				
Isolation Control /Primary Isolation point	Main Switchboard				
Isolation Detail					
Isolation Point	Isolation Method	Lock Required Yes/No	Tag Required Yes/no	Isolation Completed (Who & Date)	Isolation Removed (Who & Date)
Isolation Authorisation					
All isolations have been checked		Name	Date	Signature	
	Permit Receiver				
Isolation Removal					
All isolations have been removed		Name	Date	Signature	
	Permit Receiver				

Permit Officer Field Assessment Criteria

1. Preparation Of Work Permit				
Item	Expectation	C	NYC	Comments/Actions
1.1.	Initial discussion identified correct scope of work			
1.2.	Appropriate validity period for the Work Permit identified			
1.3.	Description of work clear			
1.4.	Tools and equipment permitted clear			
1.5.	Hazards identified			
1.6.	Nearby work considered			
1.7.	Documentation controls identified			
1.8.	Physical controls identified			
1.9.	Work Permit and associated certificates correctly filled in			
1.10.	SWMS reviewed and areas for improvement identified and discussed with Permit Receiver			
1.11.	Isolation plan completed			
1.12.	Emergency planning suitable for task and location			
1.13.	Recommissioning/return to service considerations identified			
1.14.	Traffic Management plan completed			
2. Atmospheric Monitoring				
	Expectation	C	NYC	Comments/Actions
2.1.	Equipment is bump tested on site or user has evidence that the it was bump tested that day			
2.2.	Accurate description/drawing of areas to be gas tested			
2.3.	Atmospheric Testing/ Monitoring requirements suitable for the job			
2.4.	Atmospheric Monitoring record completed			
3. Issuing Work Permit				
Item	Expectation	C	NYC	Comments/Actions
3.1.	Work Permit, certificates and other relevant documentation discussed with receiver			
3.2.	Specific Hazards (not just sources of energy) and associated controls discussed with receiver			
3.3.	Clear opportunity provided for the Receiver to challenge and/or contribute to the hazards & controls discussion in relation to all potential risks, i.e. it's not a one way lecture from the PO			
3.4.	Required signatures identified and inserted			
3.5.	Daily close out expectations discussed with Permit Receiver			
3.6.	Actions required in the event that conditions change discussed			
4. Closing out Work Permit				
Item	Expectation	C	NYC	Comments/Actions
4.1.	Permit completion and close out requirements discussed			
4.2.	Required signatures for close out discussed			