

What's Good Look Like

The WPCG are looking for some consistency when it comes to the way a Work Permit is written, because what makes a good permit will lead to this consistency. Its not about all permits being the same, its about all permits meeting the same objective "Painting a picture of your expectations from start to finish, that a third party should be able to understand." You will have your own language and preferred words, however in the end the Work Permits are all doing the same thing.

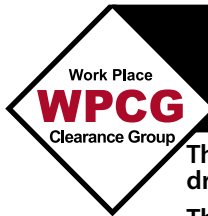
As a PO it is up to you what goes in your permit, however, the WPCG do have a standard for what they expect. If your Work Permit does not meet the standard there is potential you leave yourselves exposed if there is an incident, remember you are the one authorising the work and the work permit and compliance with it remain your responsibility for the duration of the work. If something goes wrong you want the Work Permit to work for you and not against you.

The Purpose of a Work Authorisation System is to:

- Identify the scope of a specific task and where the work will be conducted.
- Identify hazards and controls.
- Identify the personnel who have specific responsibility.
- Identify the personnel performing the work.
- Assign responsibility for various tasks.
- Identify potential issues with other work activities being conducted at the same time.
- Identify energy isolations/ lockout/tag outs.
- Identify emergency arrangements

The Work Permit Set

- Provides you with a structure to work through
- Paints a picture from start to finish, that a third party should be able to understand
- Specifically describes to the Permit Receiver and others your expectations
- Stands on its own with minimal reliance on you or other documents
- Provides a script/methodology for you to follow with the receiver when issuing the Work Permit
- Documents the discussion (if its discussed and not documented, consider it not discussed)



WORK PERMIT

WPCG ID & Number of your choice

Permit no. SC0136 182021-1 1 of 4



The original of this permit must be available at the work site with all applicable certificates, risk assessments, drawings and any other associated documents cross referenced on this form.

This permit alone does not authorise hot work, confined space entry, ground disturbance or working at heights and must be accompanied by certificates for each of these high-risk activities included in the work scope.

PERMIT VALIDITY — MAXIMUM PERMIT VALIDITY IS 7 DAYS

Permit valid from **Should be appropriate to the task** Permit valid to

Date Time Date Time

WORK LOCATION

Oil Company Site ID reference

Site address

Work area **Describes in sufficient detail to identify work area**

Equipment to be worked on/equipment or vessel ID

EMERGENCY RESPONSE

In an emergency:

- 1 Stop all work
- 2 Make site safe if safe to do so
- 3 Raise the alarm if safe to do so
- 4 Notify site operations staff
- 5 Proceed to the assembly area and wait for instructions

Emergency phone number/radio channel:

Emergency stop buttons located at:

Emergency assembly area located at

PERMIT ACTIVITY

Description of work **Describes WHAT is being done and HOW it is being done.**
What - Repair Air Leak & Replace Water Pump in LPG Turret
How- Access LPG turret turret from forecourt using harness and lifeline
Repair air leak and replace water pump using battery rattle gun and non powered hand tools
Take photos using camera
Test and return to service

Tools and equipment permitted **Describes all tools allowed under the permit**

HAZARDS (identify those hazards associated with the work area and activity)

Thermal	<input checked="" type="checkbox"/>	Pressure	<input checked="" type="checkbox"/>	Electrical	<input checked="" type="checkbox"/>	Biological	<input checked="" type="checkbox"/>	Noise	<input type="checkbox"/>
Gravity	<input checked="" type="checkbox"/>	Mechanical	<input checked="" type="checkbox"/>	Chemical	<input checked="" type="checkbox"/>	Radiation	<input type="checkbox"/>	Asbestos	<input type="checkbox"/>
Human Factors	<input checked="" type="checkbox"/>	Body Mechanics	<input checked="" type="checkbox"/>	Environmental	<input checked="" type="checkbox"/>	Nearby Work	<input checked="" type="checkbox"/>	Confined Space	<input checked="" type="checkbox"/>

Other (please specify) **Identify the specific hazards for each hazard group for example**
THERMAL: Ignition sources - Camera / rattle gun (include equipment or process ignition sources)
GRAVITY: Equipment in the work area / Open turret / Tools around turret
CHEMICAL: Hazardous areas -Turret, dip point Site- Customers refueling, tanker delivery

Previous contents of equipment/vessel

Area classification Non-hazardous area Hazardous area

SDS available for all hazardous substances? N/A Yes





WORK CONTROLS

Certificates/safety plans required?	Hot Work Certificate <input checked="" type="checkbox"/>	Ground Disturbance Certificate <input type="checkbox"/>	Atmospheric Testing & Monitoring Form <input checked="" type="checkbox"/>
	Confined Space Entry Certificate <input checked="" type="checkbox"/>	Working at Heights Certificate <input type="checkbox"/>	Lifting Certificate <input checked="" type="checkbox"/>

A task risk assessment (SWMS, JSA etc) is required for all permits.

JSA/SWMS ref no.

Isolation Plan ref no. <input type="text" value="SC0003 210510-2"/>	Asbestos Removal Control Plan ref no. <input type="text" value="Not applicable"/>
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Other Safety Plan ref no. <input type="text" value="Traffic management plan"/>	Radiation Safety Plan ref no. <input type="text" value="Not applicable"/>
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Are work area controls needed? No Yes

Barricading/demarcation <input checked="" type="checkbox"/>	Warning signs <input checked="" type="checkbox"/>	Lighting <input type="checkbox"/>	Separation distances <input type="checkbox"/>	Spill Kits <input type="checkbox"/>
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Additional equipment/job site/PPE controls

Specific site and other controls for the permit including site set up, environment controls, general PPE requirements. Do not include the specific controls for any associated certificates.

- Work area barricaded with cones, rails and work vehicle to protect workers and prevent entry by vehicles or public
- Warning signage "Danger - Keep out. Authorised personnel only" on approach sides of work area.
- Locate all equipment within barricades and stored to ensure work area clear of obstructions
- Work to stop during heavy rain
- Consult and coordinate with any contractor if they arrive on site to ensure work processes will not impinge on each other
- Cut resistant gloves to be worn to protect against any sharp edge and pinch points
- Safety glasses to be worn when removing air hoses
- Remove isolations at completion of work, confirm equipment is working correctly and update Isolation Plan

AUTHORISATION—PERMIT OFFICER

This permit is authorised, that work may be undertaken within the date range stated, on the basis that the necessary controls as stated to safely undertake the activity within the nominated work area will be established and remain in place as defined within this work permit. Work may only proceed upon daily confirmation that the controls are established and remain in place which will be confirmed by the daily endorsement of this permit. A new permit will be issued if:

- new hazards arise or site or work conditions change, or
- the permitted work scope changes, or
- controls change or their effectiveness is not adequate.

Amendments to this permit may only be made by in writing on this permit initialised by the Permit Officer of this permit.

Permits must be endorsed prior to work commencing, at least every shift.
If more frequent endorsement of permit is required the frequency will be:

WPCG ID no. <input type="text"/>	Name <input type="text"/>	Signature <input type="text"/>	Date <input type="text"/>
Company <input type="text"/>	Phone/Radio Channel <input type="text"/>		Time <input type="text"/>

Details of Permit Preparer (if different to Permit Officer)

WPCG ID no. <input type="text"/>	Name <input type="text"/>
Company <input type="text"/>	Phone <input type="text"/>

AUTHORISATION—SITE REPRESENTATIVE OR DELEGATE

I am aware that this work is planned and support its need and the permit requirements. I will ensure that any conditions or restrictions on normal site operations required to support the permitted works are understood and will be communicated to all relevant site workers while the permit is in force.

Name <input type="text" value="Full name of site rep"/>	Signature <input type="text"/>	Date <input type="text"/>	Time <input type="text"/>
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ACCEPTANCE—PERMIT RECEIVER

By signing this work permit:

- I confirm that I understand and accept conditions and controls stipulated in the work permit and all other documents referenced within this work permit, to ensure the activity can be executed safely.
- I will confirm that work will comply with local work health and safety regulations
- I will conduct and document a daily pre-start tool box talk with all workers and sub contractors to ensure that all personnel performing this activity understand the content of this permit including the hazards, associated controls, the limits of the work permitted and their responsibilities.
- I will ensure the works being undertaken are stopped if:
 - new hazards arise or site or work conditions change, or
 - the permitted work scope changes, or
 - controls change or their effectiveness is not adequate.
- I will ensure all plant & equipment is maintained, certified safe for use and used as per manufacturer's specifications and relevant Legislation, Regulations, Codes of Practice or Standards.
- I will ensure that the worksite is left in a safe and tidy condition on completion, suspension or abandonment of the work.
- I will ensure that skilled, qualified, trained and competent personnel perform the work, adhering to the conditions of the permit.

WPCG ID no.	Name	Signature	Date
<input style="width: 80px; height: 20px;" type="text"/>	<input style="width: 300px; height: 25px;" type="text" value="Name of receiver"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100px; height: 25px;" type="text"/>
Company	Phone/Radio Channel		Time
<input style="width: 230px; height: 25px;" type="text"/>	<input style="width: 160px; height: 25px;" type="text"/>		<input style="width: 100px; height: 25px;" type="text"/>

ALL PERSONNEL PERFORMING THE ACTIVITIES COVERED BY THIS PERMIT

The Permit Receiver or Permit Officer has instructed me on the safety requirements applying to the site, the work area and the activity.
 I have read and understood this permit and associated certificates and attachments.
 I agree to abide by the required conditions.
 I confirm that I am trained and competent to perform the tasks that I will be performing.

Print name	Signature	Date
<input style="width: 380px; height: 25px;" type="text" value="Name of each worker"/>	<input style="width: 260px; height: 25px;" type="text"/>	<input style="width: 140px; height: 25px;" type="text"/>
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DAILY CLOSE OUT AND ENDORSEMENT OF PERMIT

The maximum period of validity for all permits is 7 days. Permit endorsement is permitted each shift following verification by the Permit Endorser that the permitted work scope, conditions, requirements and controls have not changed. The Permit Endorser confirms, by signing here that:

- 1 The precautions required to work safely have been complied with prior to starting work each day or work period
- 2 The scope of the permitted activity has not changed
- 3 No new hazards have been identified
- 4 All stated controls remain adequate
- 5 The requirements of the permit have been communicated to all workers

A Work Clearance is required prior to work starting each day. At the completion of work each day the Permit Receiver sign to confirm that the area has been left in a safe condition (although it may remain a non-operational area, i.e. it has not been handed back) and that all staff have left the site.

Contact Details of Endorser

WPCG ID no.	Name	Company	Phone
Should be an endorser if you are leaving site or the job longer than 1 day			

Date	Time	WCF issued Yes/No	Permit Endorser Name	Signature	Daily close out (signature of Permit Receiver)	Time of close out
Required each day			Not Required on issue		Required each day when work will continue	
			Required each after initial issue or a change is made			

WORK PERMIT COMPLETION AND CLOSE OUT

Permit Receiver: The activity is complete. This permit is no longer necessary.

Permit scope completed	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Work team lock-outs removed	No <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Site cleaned up and made safe	No <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Work in confined space has been completed and all persons accounted for	No <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Remaining hazards communicated, where applicable	No <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Name	
Signature	
Date	
Time	

Site Representative: The activity is complete.

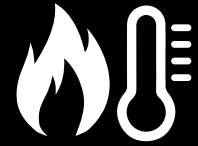
Name	Signature	Date	Time
Full name of site rep			



HOT WORK CERTIFICATE

Corresponding permit no.

1 of 1



This certificate must be prepared by the same person who has prepared the WPCG Work Permit.
 This certificate does not authorise any confined space entry, ground disturbance or heights work.
 This certificate must be issued in conjunction with a WPCG Work Permit.
 The validity period and authorisation of this certificate is aligned with the WPCG Work Permit.

Hot Work location: Where on the site Forecourt - Tank Farm LPG UGST turret area

HOT WORK DETAILS

Specific hot work activities What will create the ignition source, the equipment you are using, the task you are doing or other ignition sources
Use of camera, use of rattle gun, transferring product

Tools and equipment permitted What tools and equipment that may create an ignition source are permitted specific to this certificate
Battery rattle gun and camera

JOB SITE CONDITION

Describe the conditions which may generate hazardous or explosive vapours. Where/How are the vapours likely to come from. What areas do you need to gas test
Hazardous areas: LPG turret, fill point, pumps 1 & 2
Site operations: customer refueling, customer spill, tanker delivery
Task activities: eg breaking containment, transferring of fuel, venting/purging

HOT WORK CONTROLS

All hazardous areas potentially impacted by the work have been gas tested and will have the following controls in place:

Product movement stopped within distance 4 m of work area Remove or make safe combustibles within the work area

Atmospheric testing and monitoring form completed <input checked="" type="checkbox"/>	Continuous gas monitoring during work <input checked="" type="checkbox"/>	Spark containment <input type="checkbox"/>
Cease work during fuel delivery. <input checked="" type="checkbox"/>	Continuous monitoring during fuel delivery. Cease work if LEL ≥ 5% <input type="checkbox"/>	Leaks controlled <input type="checkbox"/>
Ventilate work area naturally <input checked="" type="checkbox"/>	Ventilate work area mechanically <input type="checkbox"/>	Wind direction considered <input checked="" type="checkbox"/>
Keep work wet <input type="checkbox"/>	Screening required <input type="checkbox"/>	Earthing/Bonding for Static <input type="checkbox"/>
Area around hot work barricaded <input checked="" type="checkbox"/>	Dispensers/pumps de-energised at switchboard <input checked="" type="checkbox"/>	Dispensers/pumps marked "Out of Service" <input checked="" type="checkbox"/>
Venting/bleeding/sampling restricted <input type="checkbox"/>	Heat sensitive items protected <input type="checkbox"/>	RCD used for all portable 240V equipment <input type="checkbox"/>
Fill and dip point seals inspected, points capped and locked <input checked="" type="checkbox"/>	Separator, sewers, drains checked for leaks and covered <input checked="" type="checkbox"/>	Check pump sumps/ Spill box/ tank turrets for free product <input checked="" type="checkbox"/>

Equipment being worked on is to be: Drained Cleaned Flushed Vented Purged (with)

Firewatch (name) Name if you are nominating one

Fire Protection (state what/where) 2 x 9KG Dry Chemical extinguishers to be in safe reach of work area

Describe any additional precautions, PPE and controls to be implemented:

Use this section for additional controls specific to the certificate and to expand on the controls you have selected above.
 Use of camera to be upwind of turret and fill point (wind direction)
 Pumps 1 & 2 to be de-energised (Dispensers/pumps de-energised at switchboard)
 Turret to be allowed to air for 5mins once open before any hot work (ventilate work area naturally)
 Cease work during fuel delivery work can recommence after delivery has finished and all gas test areas have 0% LEL
 Cease work in the event of product spill



ATMOSPHERIC TESTING & MONITORING

Corresponding permit no.

1 of 2



LOCATION

Describe, draw or list atmospheric testing locations associated with activity

LOCATIONS / FREQUENCY:

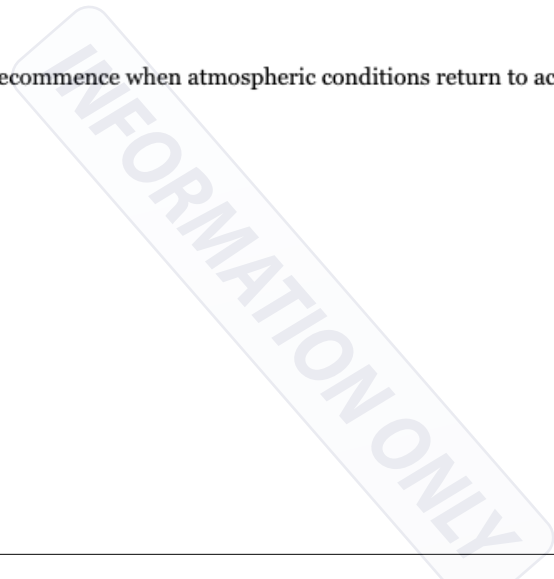
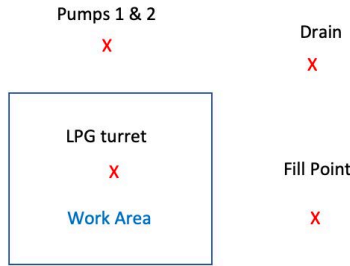
- 1. LPG turret, fill point, pumps 1 & 2 - Test prior to work commencing, after breaks in work, after tanker delivery or after customer spill
- 2. Inside turret - Test after opening turret and prior to each entry
- 3. Breathing zone of entrant - Continuously monitor during entry

This should be specific. What points do you want tested and when, where do you want gas tester placed for continuous monitoring. Use words and or drawings to make it specific and self explanatory to a third party

ACCEPTABLE LEVELS:

- 1. Oxygen 20.8 - 20.9 % / LEL 0 %
- 2. Oxygen 20.8 - 20.9 % / LEL 0 % / H2S 0 ppm / CO 0 ppm
- 3. Oxygen 20.8 - 20.9 % / LEL 0 % / H2S 0 ppm / CO 0 ppm

CEASE WORK IMMEDIATELY IF GAS DETECTOR ALARMS. Recommence when atmospheric conditions return to acceptable levels



TESTING/MONITORING REQUIREMENTS

The equipment to be used must be calibrated as per the manufacturers requirements, and bump tested at least daily before work commences. The worksite and surrounding areas noted above are to be tested at the following frequency.

Frequency (tick as applicable) Once before the start of work Continuous monitoring during work After Fuel Delivery At a specified frequency See above

Acceptable levels of Gas/Vapour/Asphyxiant:	Oxygen % Vol	Flammables % of the LEL	H2S ppm	CO ppm	Other (Specify)	
	Max <input type="text" value="20.9"/> Min <input type="text" value="20.8"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>

What do you expect the readings to be. If you say 19.5 & 21.5 for O2 you are allowing someone in that space at that range

Name/s of Authorised Gas Tester (AGT)

EQUIPMENT VALIDATION

Date	Make/Model	Gas Test Unit No.	Calibration Date	Bump Test Time	AGT signature
09-07-2021	Honeywell / Impact pro	1467890	02 May 2021	12:30	
Must be completed each day and for each gas tester					

