

**PORT WORKS PERMIT APPLICATION
EXCAVATION**

THIS IS AN APPLICATION TO OBTAIN A PERMIT FROM THE PORT OF PORTLAND TO CONDUCT WORKS AND DOES NOT REMOVE THE REQUIREMENT FOR PORT USERS TO COMPLETE THEIR OWN SAFE SYSTEMS OF WORK, INCLUDING PERMITS, WHERE REQUIRED.

Excavation is any disturbance and or removal of earth by digging including beyond 100ml. This can be by utilising manual means (shovel, spade), or machinery (loader, skid steer vehicle, backhoe, or excavator).

Company / vessel name	
Name of operator(s)	
Nominated responsible person	
Emergency contact number	

Location of works	
Description of works	
Excavation method	
Work order number (POPL only)	

Safe System of Work	Is a safe system of work in place (i.e. JSEA / Risk Assessment)?	Yes <input type="checkbox"/> No <input type="checkbox"/> → JSEA to be completed
	Are personnel suitably qualified, licenced, and trained?	Yes <input type="checkbox"/> No <input type="checkbox"/> → If no, do not proceed
	Is a Traffic Management Plan in place?	Yes <input type="checkbox"/> No <input type="checkbox"/> → Plan to be developed
	Will the excavation be conducted in a confined space?	Yes <input type="checkbox"/> No <input type="checkbox"/> → If yes, permit required
	Will the excavation involve depth beyond two (2) meters?	Yes <input type="checkbox"/> No <input type="checkbox"/> → If yes, permit required
	<i>If yes, has a rescue plan been developed and provided?</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> → Plan to be developed
Service isolations	Have services been isolated for the duration of the works? (i.e. electrical, mechanical)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	<i>If yes, please specify:</i>	
Controls	Has WorkSafe Victoria Hierarchy of Control been considered in job planning including: elimination, substitution, isolation, engineering controls, administrative controls	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Will appropriate personal protective equipment (PPE) be used?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Has Dial before you Dig service been called (phone 1100)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Has WorkSafe been notified for work involving a trench >1.5m, a shaft >2.0m or tunnel?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	<i>If yes, has a construction excavation notification form been submitted?</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Have all services been marked, and procedures developed to protect services?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Have overhead hazards been assessed?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Is the work area free of slip hazards?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Does the work area have adequate fall protection i.e. shoring, trench shields, battering?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Has the area below been isolated to restrict entry (i.e. barricades, signage)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Have port users which may be affected been notified?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	POPL will be notified of any unforeseen hazardous conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Will a post work inspection to return the area to a clean and safe condition prior to leaving be conducted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

THIS APPLICATION IS SUBMITTED SUBJECT TO THE FOLLOWING CONDITIONS

- a. The applicant understands the Permit shall be issued the day prior to the work activities and are valid for 8 hours or one shift only.
- b. The Permit shall be in the possession of the operator before work commences and must be retained in their possession throughout the operation and be produced on request to any authorised Officer of the Port of Portland.
- c. A valid Permit covers only the work stated thereon and a further Application must be obtained before any additional work is commenced.
- d. A copy of the Rescue Plan has been received by Port of Portland as part of this permit application.

APPLICANT ACKNOWLEDGEMENT

I acknowledge that it is my responsibility to ensure that all persons engaged in this work, whether employed directly or on subcontract are suitably qualified and execute their duties in a safe manner in accordance with the requirements of this Application.

Required from	DATE: / /	TIME : 24 Hr clock
Required to	DATE: / /	TIME : 24 Hr clock
Name		
Signature		Contact number

	<p>Safety & Environment Management System</p> <p>PORT WORKS PERMIT APPLICATION EXCAVATION</p>	<p>23-25 Kunara Crescent, P.O. Box 292 Portland, Victoria 3305 Australia Phone: (03) 5525 2450 Email: information@portofportland.com.au</p>
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THIS PERMIT IS ISSUED SUBJECT TO THE FOLLOWING CONDITIONS

- a. This permit is valid for eight hours or one shift only.
- b. This copy is to be retained by the person authorised to perform the excavation and must be produced on the request of any of our employees.
- c. A copy of any service location drawings have been obtained and assessed as part of this permit. Refer attachments.

AUTHORISATION

Authorisation by Port of Portland approved representative signifies that planning and risk assessment is complete, and that work is authorised to commence in accordance with this permit and risk assessment. The worksite has been inspected at the cancellation/completion of the permit and declared safe for normal operations to resume.

JSEA sighted?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Rescue Plan sighted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit No.		Date of Issue	
Permit valid from		Permit valid to	
POPL Issuing Officer		Service location drawings provided?	Yes <input type="checkbox"/> → attached. N/A <input type="checkbox"/>
Signature		Contact number	

This Application must be completed and signed prior to any work activities and retained until the completion of the works.

SITE EMERGENCY PHONE NUMBER: 5525 2450

EXCAVATION RESCUE PLAN

Rescue Plan to be defined below or included as an attachment.