

DIVING PERMIT

Requested by:	Date:		
Diving work details/Location:	Reason for dive:		
Will diving work require berth/jetty closure?	No	Yes	

SECTION 1 - DIVE TIMING

PERMIT TIMINGS	Permit Open	Time/Date:
	Permit Closed	Time/Date:
Diving method planned:		
Specialist equipment required:		

SECTION 2 - DIVE CHECKLIST TasPorts VTS 1300 366 742 MUST be contacted before and after each dive

Divers Names:	Yes	N/A
1. Are divers trained and competent? List qualifications below (all divers must be trained and competent or work can not proceed)		
2. Has a Diving Plan been completed and submitted for review? (a diving plan must be completed or work can not proceed)		3. Diving
3. Flags will be displayed? (flags must be displayed)		
4. Verification of "Dive Safety Log" and location. (a dive safety log must be completed or work can not proceed)		
5. Has TasPorts' VTS been notified? (VTS contact Number is: 1300 366 742) (TasPorts' VTS must be notified or work can not proceed)		
6. Is there a vessel/s on or nearby the berth where the dive is to take place? (If yes, the Master of any vessel/s on or adjacent to berths must be fully briefed or work can not proceed)		
7. Have the necessary precautions been taken on-board the vessel to prevent engine start-up or any other action being instigated that may jeopardise the safety of divers?		
8. Has any relevant cathodic protection been turned off?		
9. Has a JSEA/SWP/SWMS been completed and signed off by all workers involved? (If no, work can not proceed)		
10. Details of JSEA/SWP/SWMS:		
11. Additional safety precautions:		
Emergency Contact Numbers:		

SECTION 3 - RELEVANT CHARTS AND SKETCHES

General navigation chart:
Other relevant drawings and documents:

SECTION 4 - AUTHORISATION

Permit Issuer – I have discussed the work to be performed with the recipient, the hazards identified and the agreed methods of work. I authorise the work specified to proceed, provided the precautions listed on this permit and attached documentation are observed. Note: If the permit issuer leaves the site and work is not complete, full hand over must occur and new permit issuer must countersign permit.	Others Working Under this Permit:		
	Name:	Level of Qualification	Training / License No.
Name:			
Date:			
Signature:			
Permit Valid from (Date/Time):			
to (Date/Time):			
Permit Recipient Directly Managing Work - I have assessed and discussed the work to be performed with the permit issuer and agree to comply with all agreed controls, site safety requirements and with all provisions of this permit, and to explain and enforce those provisions with all persons under my responsibility.			
Recipient Name:			
Signature:			
Date:			

SECTION 5 - PERMIT HANDOVER/PERMIT FINALISATION

<input type="checkbox"/> Work not complete, handover completed <input type="checkbox"/> Work complete, proceed to permit closure	Permit Handover: Signed Outgoing Permit Issuer: _____ Dated: _____ Signed Incoming Permit Issuer: _____ Dated: _____	
<u>Completion of Works and Permit Closure – RECIPIENT</u> All work has been completed, people and equipment withdrawn from the plant/area, isolations removed and the plant/area is clean and safe for use.	<u>Permit Closure – ISSUER</u> I am satisfied that all work associated with the Permit has been completed in accordance with the Permit Conditions.	Name: _____ Signed: _____ Date: _____ Time: _____
Name: _____ Signature: _____ Date: _____ Time: _____	All Permit/s Closed Out in Permit to Work Log <input type="checkbox"/> All Permit/s filed in Trim when completed <input type="checkbox"/>	