## CONTRACTOR PERMIT TO WORK SYSTEM



A number of high risk tasks may require to be carried out within East Dunbartonshire Council (EDC) from time to time. Such tasks must be strictly supervised and various safety precautions (e.g. protective clothing, supervision, use of equipment, training, emergency procedures, first aid, etc.) must be in place prior to the commencement of work.

As a general guide a "Permit to Work" system may be required for work activities involving:

- Confined space working;
- Hot works such as welding, flame cutting and grinding;
- Working at height;
- Certain excavation works;
- Working on fragile roofs;
- Maintenance work on lifts, conveyors, hoists etc;
- Work on high voltage electrical equipment or other work on electrical equipment which may give rise to potential dangers;
- Work involving the use of hazardous/dangerous substances.

Consequently the "Permit to Work" system is a formal safety control document designed to prevent injury to employees, contractors and third parties, as well as damage to property/plant/equipment, particularly when work activities with foreseeable high risks are carried out. The "Permit to Work" sets out the work to be done, precautions to be taken and the responsibilities of those individuals carrying out the work.

The maximum period for which a Permit to Work may be issued is one shift or working day (whichever is sooner). Where work extends beyond this, the Permit to Work will be closed off, the site/equipment will be made safe and a new Permit to Work will be re-issued on the following shift/day.

The attached "Permit to Work" form has been designed to assist EDC staff ensure/assess that contractors have in place suitable and adequate control measures for all high risk work they will be carrying out within EDC premises and ensure compliance with the Health and Safety at Work, etc. Act 1974, the Management of Health and Safety at Work Regulations, 1999 and more specific health and safety legislation, such as Electricity at Work Regulations 1989; Working at Height Regulations 2005, etc.

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Permit to Work Form						
Contractor Name/ Address:						
Contact Number:						
Name of Contractor Represent	tative:					
Permit Reference No:						
Location of Work:						
Work Start Date:			Start Time:			
Work Completion Date:			Finish Time:			
Scope of Work to be performed:						
Name of FM representative:						
Tasks to be carried out include (select all that apply)						
☐ Hot Work  (Any works that include welding, abrasive wheels cutting and grinding, etc.)	☐ Pr	essure Testing	□ Electric	al Work		
☐ Confined Space Entry	(Any Walladder,	ork at Height (WAH)  AH that involves working from a stepladder, podium step etc cludes areas above and below level.)	(Operatives MU scaffold/mobile	Scaffolding JST have scaffold specific stion. CISRS/PASMA		
MEWP  (All work completed from a mobile elevated working platform.)  (Operatives MUST have IPAF training certification).	Other (Detail specific safe system of work controls being applied)			being applied)		
Risk Assessment/Method Statement						
☐ The hazards and risks from undertaking this task have been identified within the Contractor's Risk Assessment/Method Statement(s) and adequate control measures have been agreed and are in place to reduce the risk so far as is reasonably practicable						
How likely is it that an incident would result from the task being carried out?						
	□ Poss		Likely			
If an incident did occur, what		,				
<ul><li>Minor injury/damage</li><li>Any issues of concern with re</li></ul>		ous injury/moderate da the task/works being o				
notified to the Health & Safety Department.						
The completed Permit to Work form must be filed within the Property 6- Pack						

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Contractor's Declaration (to be completed by Contractor)				Yes	No
,	Have you carried out and provided a Risk Assessment and Method				
Statement(s) for the work to be carried out, which details the control					
measures in place to minimise/reduce any risk(s) to an acceptable level?					
Have you been provided with any required information to implement your control measures effectively?			_		
Are you competent to safe	ly complete these works in an occ	cupied are	ea?		
		f	DO		
Have you ensured adequate segregation of works from EDC employees/pupils/service users/members of the public?					
employees/papils/service t	daera/membera of the public:				
1	of				
(Print full nar	ne) (Pri	nt Compa	ny na	ame)	
Job Title					
		··		•	
<ul> <li>a) Understand my/our duties this task</li> </ul>	to comply with all relevant Health an	nd Safety le	egislat	tion which	າ apply to
	ation, qualifications and licenses th	nat are re	quirec	d by legis	slation to
undertake this task			_		
c) I/We have been provided Council	with all required information and ins	truction fro	om Ea	ist Dunba	rtonshire
_	make safe the workplace and cont	act the FN	/I repr	esentativ	e if I/We
	nger to myself/ourselves or others du				
	isk Assessment and Method stateme change in circumstances before con				view both
	all the site safety requirements and				en by the
FM or other representative(s) of East Dunbartonshire Council.					
Signature:		Date:			
Permit to Work	Authorisation (to be completed	by EDC R	epres	entative)	
I (on behalf of East Dunba	rtonshire Council) approve these	works to	take	place u	nder the
	nd conditions identified in the Co				
	Laternerit(5))				
Signature:		T			
Name: (block capitals)		Date:			
	Completion of Task/Work	S			
(to be signed off by E	DC representative upon satisfactory		n of ta	ask/works	;)
To the best of my knowledge, the task/work has been completed safely and the work area left in a safe condition.					
		Doto			
Name (block capitals)		Date:			
Signature:		Time:			
_					

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## **CONTRACTOR PERMIT TO WORK SYSTEM**

Name	Contractor	Signature
Comments:		

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