

*Your Company Name,
Logo and Details Here*

PERMIT TO WORK

Permit No.

Location of the work:	Permit to Work Date:
Work description:	
Work activity covered in this permit:	
Isolation Required: (e.g. Electric/Gas/Alarms)	
Known Hazards:	
Risks:	

CONTROL MEASURES: Steps taken & steps to be taken to reduce risks

Work is to be performed by a competent person, if a method statement and risk assessment has been carried out, these must be attached to this permit.

Measures:

RECEIVED BY COMPETENT PERSON (Who will carry out the work)
As Competent Person, I confirm and understand the content of this permit and that no works other than the works activity specified above will be carried out.

Signed - Competent Person	
Date:	Time:
PRINT - Competent Person	

ISSUES BY SITE AUTHORISATION PERSON:
As Authorised Person, I confirm and understand the content of this permit and that no works other than the works activity specified above will be carried out.

Signed - Competent Person	
Date:	Time:
PRINT - Competent Person	