

APPLICATION FOR WORKING AT HEIGHTS PERMIT

Working at heights is defined as any activity undertaken where there is a risk of a person falling more than 2 metres.

RESPONSIBILITIES Managers/Supervisors

Managers/Supervisors need to ensure that employees working at heights comply with this procedure. Where an employee is required to supervise any activity, which involves working at heights, the manager/supervisor is responsible for ensuring that delegated safety responsibilities are fulfilled and that appropriate supervision is provided. JSAs and a Working at Height Permit must be completed prior to commencing the work, with appropriate records relating to such activity kept.

Employees

Employees may only work at heights if they have received training in such activity and are considered competent to work at heights. Employees must complete a JSA and complete a Working at Heights Permit. Employees must use the correct personal protective equipment for the task.

Responsible Officers

Responsible Officers must ensure that Contractors have completed a Working at Height permit along with a JSA prior to commencing the work.

Procedure

A Job Safety Analysis must be conducted prior to commencing any work, and a Working at Height Permit must be completed and signed off by Supervisor/Responsible Officer prior to commencing work. Refer to the Work Safe Code of Practice "Prevention of Falls at Workplaces" to assist with compliance.

http://www.docep.wa.gov.au/WorkSafe/PDF/Codes_of_Practice/code_falls.pdf

Common Fall Hazards

| | | |
|---|---|---|
| Surfaces – stability; fragility or brittleness; slipperiness; safe movement of worker; strength of supporting loads; slope of working surface | Proximity of workers to unsafe areas - loads placed on elevated work areas; objects below work area, working above others, power lines nearby | Opening or holes which will require identification or protection or unguarded shafts or excavations |
| Levels that change | Structure stability | Ground evenness/stability |
| Scaffolding incorrectly erected | Raised working edge housekeeping | Edges – are they protected? |
| Hand grip loss possibility | Movement of plant/equipment | Access/egress to/from work area |
| Manual handling | Weather (windy, wet, too hot etc) | Lighting |
| Footwear and clothing suitable | Ladders – where and how they be used | Employees unfamiliar with task to be carried out at height |

Types of Equipment which may be used when working at heights

| | | |
|----------------------|-------------|--------------------------------------|
| Static Lines | Scaffolding | Fixed work platform |
| Mobile work platform | Step ladder | Safety harness & fall arrestor |
| Hard hat | Toe Boards | Waste High Barrier / edge protection |



WORKING AT HEIGHTS PERMIT

| | |
|---|---|
| TO BE COMPLETED BY EMPLOYEE/CONTRACTOR | |
| Location of work _____ | |
| Employees assigned to task <i>(must be trained in working at heights)</i> . | |
| _____ Trained Yes <input type="checkbox"/> No <input type="checkbox"/> _____ | Trained <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ Trained Yes <input type="checkbox"/> No <input type="checkbox"/> _____ | Trained <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Contractors. <i>(Company name, supervisor and contact details)</i> | |
| _____ Tel No: _____ | |
| Description of work to be undertaken | |
| _____ | |
| <p>POWER LINES</p> <p><input type="checkbox"/> Area must be clear of power lines by 4m or power lines must be de-energised</p> <p>LADDERS</p> <p>The precautions listed below must be observed:</p> <ul style="list-style-type: none"> <input type="checkbox"/> In good working order & comply with AS 1892. <input type="checkbox"/> Secured against movement at head & base. <input type="checkbox"/> Metal ladders not used in or near electrical cabling or circuitry <input type="checkbox"/> Any equipment to be carried to the task is secured to a belt or hoisted up separately <input type="checkbox"/> Any ladder work to be conducted in a pedestrian or vehicular thoroughfare is cordoned off by barriers and signed. <input type="checkbox"/> Step ladder spreaders locked into position. <input type="checkbox"/> Ladder extends 1 metre above top rest position <input type="checkbox"/> Only approved attachments used. <p>PERSONAL PROTECTIVE EQUIPMENT</p> <p>The following PPE <i>(tick)</i> shall be worn <i>(must be checked for wear & tear etc)</i>:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Safety harness and/or safety line/lifeline <input type="checkbox"/> Eye protection <input type="checkbox"/> Hand protection <input type="checkbox"/> Foot protection <input type="checkbox"/> Protective clothing <input type="checkbox"/> Safety helmet <input type="checkbox"/> Other <i>(please specify)</i> | <p>MECHANICAL AIDS – FORKLIFTS/TEMPORARY WORKING PLATFORMS</p> <p>The precautions listed below must be observed:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Equipment providing mechanical elevation must be Safety approved <input type="checkbox"/> The area for use is not impeded or in proximity to electrical cabling or live wires. <input type="checkbox"/> Fall arresting harness used for work involving constant elevation <input type="checkbox"/> Cages fitted to a forklift must comply with AS2359 <p>SCAFFOLDING & EDGE PROTECTION</p> <p>The precautions listed below must be observed:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Scaffolding complies with AS/NZS 1576:1995 & AS.NSZ 1577 <input type="checkbox"/> Scaffolding equipment with toe-holds & guardrails. <input type="checkbox"/> Mobile scaffolding level and wheels locked when in use. Mobile scaffolds must not be moved when occupied. Outriggers are in place for stability. <input type="checkbox"/> Edge-protection must comply with AS 1657. <p>PRECAUTIONS</p> <p>The following precautions have been implemented:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Warning notice / barricades in position <input type="checkbox"/> Special precautions are: <ul style="list-style-type: none"> a) _____ b) _____ c) _____ d) _____ |
| AUTHORISATION | |
| The work at heights described above is in my opinion in a safe condition for the work to be done, provided that the precautions above are fully observed. | |
| Employee/Contractor <i>(name)</i> _____ | <i>(signature)</i> _____ |
| Supervisor or Responsible Officer <i>(name)</i> _____ | <i>(signature)</i> _____ |
| Permit valid until | |
| Time _____ | Date _____ |

Original to SCC/Responsible Officer Duplicate to Contractor

Triplicate to job file