WORK CLEARANCE FORM

Australian Institute of Petroleum

THIS FORM MUST BE COMPLETED BEFORE WORK COMMENCES (except for completion signatures)
IF WORK EXTENDS BEYOND ONE DAY, A NEW FORM MUST BE COMPLETED FOR EACH DAY

Contractor Company Name: _____

Oil Company: _____ Location Name: _____

Job/Order No.: _____ Address: _____

Work Description: _____

Tools/Equipment to be used: _____

Refer relevant Hazards Map and identify work location for completion of checklist . Tick ☐ *below*

☐ Inside and outside hazardous areas within the site boundary
Complete Sections A, B, C

☐ Inside Office/Sales Building
Complete Sections A, C

Section A - Conditions

The contractor is to check that all of the following conditions are acceptable:
Write **"YES/NO"** when checked:

- _____ All STATUTORY REGULATIONS applying to the job shall be complied with
- _____ LPG or PETROLEUM PRODUCTS delivery into site storage tanks will not impact work
- _____ FLAMMABLE or COMBUSTIBLE product and/or materials within 8 metres of work area will not impact work
- _____ There is NO ENTRY into any EXCAVATION or PIT, or into any TANK or other Confined Space eg. turret, pit, sump etc.

If any NO answers the Contractor is to refer to the Client Company for permit or authorization.

Section B - Inside and Outside Hazardous Areas (*refer to Hazards Map to verify*)

The contractor is to check that any device that can produce or cause a source of ignition will not be operated within the site boundary
Write **"YES/NO"** when checked:

- _____ Electrical equipment (including all battery operated items such as cordless drills)
- _____ Petrol driven devices
- _____ Excavation equipment (motorised)
- _____ Blow torches / soldering equipment
- _____ Oxy-acetylene or electric welding equipment
- _____ Matches / cigarette lighters
- _____ Concrete cutting, breaking or drilling equipment
- _____ Grinding equipment
- _____ Any other device which can produce or cause a source of ignition

For Reference
Work Permit
Number
Where Applicable
.....

If any YES answers the Contractor is to refer to the Client Company for permit or authorization.

Section C - Precautions to be taken - All Work - Contractor must ensure the Work Area is Safe

"YES"	"N/A" - (Not Applicable)	
☐		Dry Powder fire extinguishers (9kg min. or equivalent) within work area
☐		Protective clothing and full cover footwear to be worn
☐		Safe access / egress to and from works area
☐	☐	Work "At Heights" complies with WH&S regulations
☐	☐	Electrics isolated and tagged and locked out where possible
☐	☐	Transfer and/or Dispensing pumps to be shut down – valves closed
☐	☐	Barriers erected around work area
☐	☐	Extension cables must not cross the hazardous areas
☐	☐	Wet down area for concrete breaking or drilling
☐	☐	Check work will not affect underground services, eg. telephone, electricity, pipelines, etc.

All in accordance with statutory and client requirements

ADDITIONAL PRECAUTIONS
(to be completed by contractor if necessary)
_____
_____
_____

JSA COMPLETED
Reference No _____

No work to be commenced until "YES" or "N/A" apply and are ticked

TIME ON SITE START TIME: _____ AM / PM FINISH TIME: _____ AM / PM

- The contractor will observe the above conditions and precautions for work undertaken for this job.

CONTRACTOR (Print Name): _____ CONTRACTOR* (Print Name): _____

Signed: _____ ___/___/___ Signed: _____ ___/___/___

- The Site Operator or Manager acknowledges that this job will be undertaken, and witnesses the Contractor's signature.

SITE OPERATOR/MANAGER: _____ (Print Name) SITE OPERATOR/MANAGER*: _____ (Print Name)

Signed: _____ ___/___/___ Signed: _____ ___/___/___

* Print name only if different from start signature.

COMMENTS: _____
_____
_____

White Copy to be sent with the contractor's invoice, if requested by the oil company. Blue Copy to be left at site. Green Copy to be filed by the contractor.