

COVID-19 Work Permit
MUST BE COMPLETED PRIOR TO STARTING WORK
AND CLOSED AT THE END OF THE SHIFT

A COVID-19 work permit is required to be completed on sites or work areas with more than 3 persons.

Project/ Location of Work:		Date:	
Description of Work		Proposed Start Time:	
Job Number:		Proposed Finish Time:	

PLEASE NOTE: This COVID-19 Work Permit is only valid for a maximum of 1 shift in one day. The permit **MUST** be signed off by the Project Manager or delegate prior and is subsequent to any works area that has more than 3 workers employed.

If any of the questions result in a "NO" answer, please call the issuing Platinum Electrical & Air officer immediately and DO NOT UNDER ENTER SITE UNDER ANY CIRCUMSTANCES

#	Question	Yes / No
1	Are you are actively practicing the recommendations of social distancing, staying 1.5 metres away from others and not shaking hands as per QLD Government Guidelines (https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19)?	
2	Are you regularly washing your hands throughout the day and/or regularly using alcohol-based sanitiser?	
3	If you are feeling unwell with symptoms such as fever, sore throat, cough or shortness of breath, you know you are obliged to inform your team and then self-isolate, until tested?	
4	Have you completely avoided close contact with someone who has a confirmed case of COVID-19 (Coronavirus)? Note: Close contact is defined as face-to-face contact for more than 15 minutes or have shared an enclosed space for more than two hours.	
5	Have you completely avoided close contact with someone who is currently self-isolating, who may have contracted COVID-19 (Coronavirus)? Note: " who may " includes people who have come into contact with people that have contracted COVID-19, travelled overseas, self-isolating or are unwell.	
6	Will you and your fellow employees ensure that hands are either washed or sanitised, to the standards in QLD Government Guidelines (https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19)?	
7	Please indicate which risk control/s will be implemented whilst onsite:	
	7a Washing your hands regularly or using alcohol-based sanitiser?	
	7b Cover your nose and mouth with a tissue or bent elbow when coughing or sneezing?	
	7c Avoid touching your face, nose and mouth?	
	7d Avoid shaking hands?	
	7e Social distancing - staying 1.5m away from anyone?	
	7f List extra controls implemented onsite:	

Issue of Permit

Job Supervisor: I have completed the above permit for works to be conducted on this site. The people in this area have been briefed.	Name:	Date:
	Signature:	Time:
Permit Authoriser: I have reviewed the contents of this permit and consider that this permit can be issued.	Name:	Date:
	Signature:	Time:
Project Manager or Delegate:	Name:	Date:
	Signature:	Time:

Workers Assigned to Permit

The following workers are authorised to conduct works under this permit and will abide by the controls:

Name	Photo	Name	Photo

Photo's of Site COVID-19 precautionary tools

Masks	Sanitiser	Gloves	Social Distancing

Closure of Permit:

Permit Authoriser Sign Off: I confirm that I have reviewed the above information for the stated work area and that this permit can now be closed.	Name:	Date:
	Signature:	Time:
Project Manager or Delegate:	Name:	Date:
	Signature:	Time:

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