

Mobile Lift Permit

Mobile Lift Permits **MUST** be completed by SCU staff or contractors scheduled to undertake any work at or above 2 metres using mechanical lifts (i.e. ewp, scissor lift or crane) on university property. This work must consider overhanging services. All permits must be in line with WHS legislative requirements and approved by an authorised Permit Issuer.

ALL WORK IS TO CEASE ON THE SOUNDING OR RAISING OF A FIRE OR OTHER EMERGENCY ALARM

PERMIT DETAILS											
PERMIT HOLDER	Permit is Valid from:					Until:					
	Permit Holder:		Staff	Contractor			Company Name:				
	Worker Name:					Mobile:					
	Description of Works:										
	Location of Works:										
	Maximum Height:			m	Public/Private services nearby?			Yes	No		
	Distance from services:			m	Distance from buildings?					m	
	Insert lift load:			kg/T	Device is being used?		EWP	Scissor Lift	Crane		
	Prestart Review										Tick
	Pre-start meeting conducted with SCU PS Representative?										
Safety Checklist						Tick	Comments				
Are SWMS and RA in place, understood by all, and submitted to SCU?											
Overhead services identified and marked – will covers be required?											
Are tag lines required to support the lift?											
The ground condition has been inspected and accessed?											
Is the lifting point closed? To prevent items or people from falling.											
Are there any services below the lifting services which could be damaged by the weight?											
The team have chosen a safe mode of communication (i.e. walkie talkie)?											
Pedestrian traffic redirected to avoid any unnecessary exposure (no access beneath the lift)?											
Designated clearance area around, below and above where work is being performed?											
Combustible materials cleared from and/or barriers installed to prevent spark ignition?											
Worker Safety Checks										Tick	
Is appropriate personal protective equipment available, in good condition, and worn by all? Hi-vis, hard hats etc.											
Are all people conducting the work medically and physically fit and trained/qualified to perform the task?											

PERMIT AUTHORISATION

ISSUER

I, the permit issuer, approve this excavation work (as listed above) to proceed.

Name of Permit Issuer:

Signature:

Date of Issue:

PERMIT DECLARATION

PERMIT HOLDER

As the Permit Holder, I acknowledge and understand the conditions of this permit and:

- Am competent to coordinate this work in accordance with this permit and associated risk assessment.
- Will implement all the controls highlighted above and outlined in the risk assessment.
- Shall share this permit and associated risk assessment with the other worker/s to ensure they understand the conditions of this permit.

Name of Permit Holder:

Signature:

Date:

My signature below acknowledges that I agree and understand the conditions of this permit (other worker/s).

Name of worker: _____ Signature: _____ Date: _____

FINALISATION

PERMIT HOLDER

 As the Permit Holder, I confirm all work is **complete**, all workers have **signed off** the Permit and the worksite has been **left clean and tidy**.

Name of Permit Holder:

Signature:

Date:

FEEDBACK

NON-COMPLIANCE

		Consequences				
		Insignificant	Minor	Moderate	Major	Severe
Likelihood	Almost Certain	Moderate	Moderate	High	Extreme	Extreme
	Likely	Low	Moderate	High	High	Extreme
	Possible	Low	Moderate	Moderate	High	High
	Unlikely	Low	Low	Moderate	Moderate	Moderate
	Very Unlikely	Low	Low	Low	Low	Moderate

Ensure all risk assessments and SWMS are sent to pscontractor@scu.edu.au prior to starting works!

Once permit is complete and fully signed off - please submit here>>>