

WORKING AT HEIGHT PERMIT

NAME (S):				DATE:
TASK:				
Method of Working at Height (tick box)	FLT/ Man Cage <input type="checkbox"/>	MEWP <input type="checkbox"/>	Ladder/ Steps <input type="checkbox"/>	If ladder or steps were used -which ones (Enter Ladder ID):

THIS PERMIT IS TO BE USED WHENEVER ANYONE ON SITE IS WORKING AT HEIGHT EXCEPT FOR ROOF WORK (USE ROOF PERMIT).

N o.	Item	Yes	No	Supervisor checks (initials)
1	Have alternatives to working at height been fully considered, including doing some of the work on the ground – e.g. lowering equipment to the ground to be worked on?			
2	Has the method chosen taken into account the risk, the duration of use and required task?			
3	Has the equipment been chosen based on suitability for the task and not convenience.			
4	Have appropriate measures been taken to prevent a fall from height? (Consider guard rails – top <i>min 950mm high</i> , middle and toe boards, fall restraint equipment – is it too long/ short, have the relevant people been trained, etc.)			
5	Has fall restraint equipment been considered? If fall arrest equipment is used is it too long? Has all equipment that will be used been checked? Is it subject to Insurance inspection – is it current?			
6	If scaffolding is being used does it have a valid "scafftag" or similar certificate completed by a qualified person?			
7	Are all people involved trained for the task they are doing? (Consider FLT operators, cherry picker operators, use of harness etc.) Are they comfortable working at height?			
8	Has the area been made safe? (Consider cordoning off the area, locking off any machinery, isolating any services etc.)			
9	Have the relevant people been informed? (Consider shift changeover, contractors or visitors)			
12	Is all the equipment in a safe condition? – Check it! <i>Note: The person checking the equipment MUST have the authority to discard it if needed.</i>			
13	Will all equipment be used in accordance with training, safe practice and safe systems of work (as applicable)?			
14	Has consideration been given to a person(s) becoming trapped at height? (Consider communication, alternative routes, rescue etc.)			
15	Has all relevant equipment been suitably secured? Are persons below protected from falling objects by toe boards, netting etc.?			
16	Is the surface on which any people or equipment is located firm and secure? (Consider wet floor, soft ground, loose pipe work, fragile surfaces etc.)			
17	If working in a man cage, mewp etc the "cage" must be clear of debris before use (and should be cleaned afterwards).			
18	Has this permit addressed all issues of the task?			

*Supervisor checks are required only if contractors are using this form

IF THE ANSWER TO ANY QUESTION IS "NO" SUITABLE ACTION MUST BE TAKEN BEFORE STARTING THE TASK.

To be signed by the person in charge of the task

SIGNED