



**LOW VOLTAGE PERMIT**

REF: **0001**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0002

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

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## LOW VOLTAGE PERMIT

REF: 0003

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Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

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EARTHING:	<input style="width: 98%;" type="text"/>
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OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
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### EMERGENCY CONTACT *(Person not involved in the work)*

Name:	<input style="width: 95%;" type="text"/>	Position:	<input style="width: 95%;" type="text"/>	Contact:	<input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0004

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Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

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**LOW VOLTAGE PERMIT**

REF: **0005**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

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<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

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<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0006

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

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## LOW VOLTAGE PERMIT

REF: 0007

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

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NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

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Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0008

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Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
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	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>		Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.			Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
			Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0009

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name:	<input style="width: 95%;" type="text"/>	Position:	<input style="width: 95%;" type="text"/>	Contact:	<input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input style="width: 95%;" type="text"/>	Signature:	<input style="width: 95%;" type="text"/>
		Valid From:	Time: <input style="width: 20%;" type="text"/> Date: <input style="width: 20%;" type="text"/>

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor:	<input style="width: 95%;" type="text"/>	Signature:	<input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input style="width: 95%;" type="text"/>	Signature:	<input style="width: 95%;" type="text"/>	Time:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0010

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0011

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: **0012**

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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SECURITY		
I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.		
<input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>

ESTATES & CAPITAL DEVELOPMENT		
I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.		
<input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>



## LOW VOLTAGE PERMIT

REF: 0013

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?

YES       NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?

YES       NO

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0014

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0015

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0016**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0017**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0018

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0019

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0020**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input type="text"/>
	<i>Specify if required for special circumstances.</i>

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0021**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:

*State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.*

WARNING NOTICES:

*State where Caution/Danger notices have been posted.*

PROVE APPARATUS DEAD:

*State what tests have been made, where and with what instruments.*

EARTHING:

*State where apparatus has been earthed and, for testing, which earths may be removed.*

OTHER PRECAUTIONS:

*Specify if required for special circumstances.*

**EMERGENCY CONTACT (Person not involved in the work)**

Name:  Position:  Contact:

**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:  Signature:

Valid From: Time:  Date:

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time:  Date:

Permit Acceptor:  Signature:

**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:  Signature:  Time:  Date:

**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

Time:  Date:

**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

Time:  Date:



## LOW VOLTAGE PERMIT

REF: 0022

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:

State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.

WARNING NOTICES:

State where Caution/Danger notices have been posted.

PROVE APPARATUS DEAD:

State what tests have been made, where and with what instruments.

EARTHING:

State where apparatus has been earthed and, for testing, which earths may be removed.

OTHER PRECAUTIONS:

Specify if required for special circumstances.

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 70%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 80%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 80%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 80%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0023

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: **0024**

Contractor:	Permit Acceptor:	Mobile Number:
Location:	Designation of Circuit:	Area(s) Affected:
Job Details:		

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	
<i>Specify if required for special circumstances.</i>	

### EMERGENCY CONTACT *(Person not involved in the work)*

Name:	Position:	Contact:
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	Signature:	Valid From:	Time:	Date:
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time:	Date:
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Permit Acceptor:	Signature:
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	Signature:	Time:	Date:
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

	Time:	Date:
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

	Time:	Date:
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## LOW VOLTAGE PERMIT

REF: 0025

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0026

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0027**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0028**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0029

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0030

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0031**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0032

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0033

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?

YES       NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?

YES       NO

### PRECAUTIONS

ISOLATION:

State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.

WARNING NOTICES:

State where Caution/Danger notices have been posted.

PROVE APPARATUS DEAD:

State what tests have been made, where and with what instruments.

EARTHING:

State where apparatus has been earthed and, for testing, which earths may be removed.

OTHER PRECAUTIONS:

Specify if required for special circumstances.

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20px;" type="text"/>	Date: <input style="width: 20px;" type="text"/>
---	---	---	---

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20px;" type="text"/>	Date: <input style="width: 20px;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20px;" type="text"/>	Date: <input style="width: 20px;" type="text"/>
---	---	---	---

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20px;" type="text"/>	Date: <input style="width: 20px;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20px;" type="text"/>	Date: <input style="width: 20px;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0034

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0035

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0036

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0037**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0038**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0039**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0040

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0041**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0042

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>	
		Signature: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0043

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From:	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To:	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>		Signature: <input style="width: 95%;" type="text"/>

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0044

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>	
		Signature: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 80%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 80%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 80%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0045

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: **0046**

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?

YES       NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?

YES       NO

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>	
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
<small>State where Caution/Danger notices have been posted.</small>	
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
<small>State what tests have been made, where and with what instruments.</small>	
EARTHING:	<input style="width: 98%;" type="text"/>
<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>	
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
<small>Specify if required for special circumstances.</small>	

### EMERGENCY CONTACT (Person not involved in the work)

Name:	<input style="width: 95%;" type="text"/>	Position:	<input style="width: 95%;" type="text"/>	Contact:	<input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input style="width: 95%;" type="text"/>	Signature:	<input style="width: 95%;" type="text"/>
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Valid From:	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
Valid To:	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Permit Acceptor:	<input style="width: 95%;" type="text"/>	Signature:	<input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input style="width: 95%;" type="text"/>	Signature:	<input style="width: 95%;" type="text"/>	Time:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0047

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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SECURITY		
I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.		
<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>

ESTATES & CAPITAL DEVELOPMENT		
I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.		
<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>



## LOW VOLTAGE PERMIT

REF: 0048

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?

YES       NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?

YES       NO

### PRECAUTIONS

ISOLATION:

State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.

WARNING NOTICES:

State where Caution/Danger notices have been posted.

PROVE APPARATUS DEAD:

State what tests have been made, where and with what instruments.

EARTHING:

State where apparatus has been earthed and, for testing, which earths may be removed.

OTHER PRECAUTIONS:

Specify if required for special circumstances.

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0049

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>	
		Signature: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0050

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:

State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.

WARNING NOTICES:

State where Caution/Danger notices have been posted.

PROVE APPARATUS DEAD:

State what tests have been made, where and with what instruments.

EARTHING:

State where apparatus has been earthed and, for testing, which earths may be removed.

OTHER PRECAUTIONS:

Specify if required for special circumstances.

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From:	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0051

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0052**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0053

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>	
		Signature: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0054**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0055**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0056

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 99%; height: 95%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0057

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0058

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>		Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.			Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
			Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0059

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>		Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.			Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
			Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0060

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0061

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0062

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0063

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0064

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0065

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0066

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0067

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0068

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0069

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0070

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0071

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>		Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.			Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
			Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0072

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0073**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0074

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?

YES       NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?

YES       NO

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0075**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input type="text"/>
	<i>Specify if required for special circumstances.</i>

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0076**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0077

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0078

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?

YES       NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?

YES       NO

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0079

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:

State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.

WARNING NOTICES:

State where Caution/Danger notices have been posted.

PROVE APPARATUS DEAD:

State what tests have been made, where and with what instruments.

EARTHING:

State where apparatus has been earthed and, for testing, which earths may be removed.

OTHER PRECAUTIONS:

Specify if required for special circumstances.

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0080

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0081

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0082

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 99%; height: 95%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0083

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

Has a method statement been undertaken for this task?  YES  NO

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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SECURITY		
I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.		
<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>

ESTATES & CAPITAL DEVELOPMENT		
I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.		
<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>



**LOW VOLTAGE PERMIT**

REF: **0084**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0085**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
----------------	----------------------	------------	----------------------	-------------	----------------------------	----------------------------

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0086

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0087

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0088

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0089

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT *(Person not involved in the work)*

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0090**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0091

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0092

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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**LOW VOLTAGE PERMIT**

REF: **0093**

Contractor:	<input type="text"/>	Permit Acceptor:	<input type="text"/>	Mobile Number:	<input type="text"/>
Location:	<input type="text"/>	Designation of Circuit:	<input type="text"/>	Area(s) Affected:	<input type="text"/>
Job Details:	<input type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

**PRECAUTIONS**

ISOLATION:	<input type="text"/>
<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>	
WARNING NOTICES:	<input type="text"/>
<i>State where Caution/Danger notices have been posted.</i>	
PROVE APPARATUS DEAD:	<input type="text"/>
<i>State what tests have been made, where and with what instruments.</i>	
EARTHING:	<input type="text"/>
<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>	
OTHER PRECAUTIONS:	<input type="text"/>
<i>Specify if required for special circumstances.</i>	

**EMERGENCY CONTACT (Person not involved in the work)**

Name:	<input type="text"/>	Position:	<input type="text"/>	Contact:	<input type="text"/>
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**AUTHORISATION AND ACCEPTANCE**

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	<input type="text"/>	Signature:	<input type="text"/>	Valid From:	Time: <input type="text"/>	Date: <input type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input type="text"/>	Date: <input type="text"/>
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Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>
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**HANDBACK, RECEIPT AND CANCELLATION**

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	<input type="text"/>	Signature:	<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**SECURITY**

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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**ESTATES & CAPITAL DEVELOPMENT**

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input type="text"/>	Time:	<input type="text"/>	Date:	<input type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0094

Contractor:	Permit Acceptor:	Mobile Number:
Location:	Designation of Circuit:	Area(s) Affected:
Job Details:		

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	
<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>	
WARNING NOTICES:	
<small>State where Caution/Danger notices have been posted.</small>	
PROVE APPARATUS DEAD:	
<small>State what tests have been made, where and with what instruments.</small>	
EARTHING:	
<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>	
OTHER PRECAUTIONS:	
<small>Specify if required for special circumstances.</small>	

### EMERGENCY CONTACT (Person not involved in the work)

Name:	Position:	Contact:

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer:	Signature:	Valid From:	Time:	Date:

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time:	Date:

Permit Acceptor:	Signature:

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor:	Signature:	Time:	Date:

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

	Time:	Date:

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

	Time:	Date:



## LOW VOLTAGE PERMIT

REF: 0095

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0096

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 15%;" type="text"/>	Date: <input style="width: 15%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0097

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To:	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
-----------	--	--

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
---	---

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
---	---	--	--

#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
--	--	--

#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0098

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
--	--	---

### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>		Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.			Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
			Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0099

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?  YES  NO

Has a method statement been undertaken for this task?  YES  NO

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<small>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</small>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<small>State where Caution/Danger notices have been posted.</small>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<small>State what tests have been made, where and with what instruments.</small>
EARTHING:	<input style="width: 98%;" type="text"/>
	<small>State where apparatus has been earthed and, for testing, which earths may be removed.</small>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<small>Specify if required for special circumstances.</small>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.

Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>
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### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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## LOW VOLTAGE PERMIT

REF: 0100

Contractor:	<input style="width: 95%;" type="text"/>	Permit Acceptor:	<input style="width: 95%;" type="text"/>	Mobile Number:	<input style="width: 95%;" type="text"/>
Location:	<input style="width: 95%;" type="text"/>	Designation of Circuit:	<input style="width: 95%;" type="text"/>	Area(s) Affected:	<input style="width: 95%;" type="text"/>
Job Details:	<input style="width: 100%; height: 100%;" type="text"/>				

Has a suitable and sufficient risk assessment been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	
Has a method statement been undertaken for this task?	<input type="radio"/> YES	<input type="radio"/> NO	

NB: The Management of Health and Safety at Work Regulations 1999 (as amended) require that organisations with five or more employees record the significant findings of assessments and identify those especially at risk. Risk assessments and method statements must be submitted to Estates & Capital Development Department in advance of works commencing.

### PRECAUTIONS

ISOLATION:	<input style="width: 98%;" type="text"/>
	<i>State isolation point(s), whether or not isolator(s) has (have) been padlocked off, fuses withdrawn.</i>
WARNING NOTICES:	<input style="width: 98%;" type="text"/>
	<i>State where Caution/Danger notices have been posted.</i>
PROVE APPARATUS DEAD:	<input style="width: 98%;" type="text"/>
	<i>State what tests have been made, where and with what instruments.</i>
EARTHING:	<input style="width: 98%;" type="text"/>
	<i>State where apparatus has been earthed and, for testing, which earths may be removed.</i>
OTHER PRECAUTIONS:	<input style="width: 98%;" type="text"/>
	<i>Specify if required for special circumstances.</i>

### EMERGENCY CONTACT (Person not involved in the work)

Name: <input style="width: 95%;" type="text"/>	Position: <input style="width: 95%;" type="text"/>	Contact: <input style="width: 95%;" type="text"/>
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### AUTHORISATION AND ACCEPTANCE

I hereby declare that the above precautions have been taken and made known to the Competent Person in charge of the work. I consider that the apparatus specified above is safe to work on.

Permit Issuer: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Valid From: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
I acknowledge receipt of this permit and understand the safety precautions described above. Neither I or the workers under my control will work on any other electrically dangerous apparatus. I will re-sign this permit once the work is completed.		Valid To: Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
		Permit Acceptor: <input style="width: 95%;" type="text"/>	

### HANDBACK, RECEIPT AND CANCELLATION

I confirm that the activity has been completed, checked by myself and the area left secure and in a safe and tidy condition.

Permit Acceptor: <input style="width: 95%;" type="text"/>	Signature: <input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### SECURITY

I acknowledge receipt of this permit having been informed that the person in charge has left the area secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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#### ESTATES & CAPITAL DEVELOPMENT

I am satisfied that the activity has been completed in accordance with this permit and the area left secure and in a safe and tidy condition.

<input style="width: 95%;" type="text"/>	Time: <input style="width: 20%;" type="text"/>	Date: <input style="width: 20%;" type="text"/>
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