|  |  |  |  |
| --- | --- | --- | --- |
| **Consultation with involved Parties has occurred** | **Yes** | **No** | **N/A** |
| Consultation with involved Parties has occurred | [ ]  | [ ]  | [ ]  |
| Permit No |         | Date |   |
| Workplace |         | System to be Isolated |       |
| Person Requesting Energisation | Name |       |
|  | Company |       |
| Authorised Person | Name |       |
|  | Company |       |
| Mirvac Representative (Permit Issuer) |       |
| **Description of Work That Has Been Undertaken / Service to be Energised** |
|       |
| **Description of the Energisation Process** |
|       |
| **Verification of Control of Energy Sources** |
| **Identify Relevant Energy Sources are Controlled** | Yes | No |  | Yes | No |
| Electrical |[ ] [ ]  Mechanical |[ ] [ ]
| Pneumatic |[ ] [ ]  Hydraulic |[ ] [ ]
| Radiation |[ ] [ ]  Steam |[ ] [ ]
| Liquid |[ ] [ ]  Other |[ ] [ ]
| **Identify Energisation Sequence and Controls (and precautions should the process not proceed as planned / spans more than one work shift)** |
|       |
| **For Electrical Energisation /Commissioning**  |
| Distribution Board Identification: |       | Circuit Identification: |       |
| Electrical energy sources to be activated:       |
| **Number** | **Description**  | **No. Of Outlets**  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Low Voltage Rescue Kit is available at the workplace: Yes [ ]  No [ ]  |
| **Permit Issuer authorises energisation to be performed** |
| Permit Issuer: |       | Signature: |       | Date: |   |
| **Confirmation of Energisation/Commissioning Completion** |
| Name: |       | Signature: |       | Date: |   |
| **List Accompanying Documentation** |
|       |
| **Confirmation of Completion Nominated Mirvac Representative** |
| Name: |       | Signature  |       | Date: |       |