

## Contractor Authority to Commence Work

Date			Site								
Plant / Equipment:											
Contractors Name						Company					
Visy Contractor Manager/Delegate:											
Description of task to be performed:											
Have all Contractors signed in?										YES	NO
<b>If NO then all works must cease immediately until such time as all contractors have signed in</b>											
Have all Contractors completed the Visy Contractor Induction				YES	NO	Have all Contractors Completed the Site Specific Contractor Induction				YES	NO
<b>If NO then all works must cease immediately - Contractors MUST completed the relevant inductions prior to commencement of any works on site</b>											
Has a Contractor JSEA /SWMS been completed for the task			YES	JSEA/SWMS No.							
			NO	Have all Contractors involved with the task signed onto the JSEA/SWMS							YES
<b>If NO then all works must cease immediately - Contractors MUST completed a JSEA / SWMS prior to commencement of any works on site</b>											
<b>High Risk Task</b> – Identify any Permits/Licences that may be required for the task											
Working at heights?	YES	NO	Permit No.								
Hot Work?	YES	NO	Permit No.								
Confined Space	YES	NO	Permit No.								
Removal of Asbestos?	YES	NO	Permit No.								
Is a Licence required?	YES	NO	Licence Type & No.								
<b>Isolation</b> – Ensure that the Visy/Site LOTO procedure(s) are adhered to at all times											
Does the Plant/Equipment need to be been Isolated?										YES	NO
<b>If YES work MUST NOT Commence until all Isolation(s) are completed and all energy sources identified</b>											
<b>Electrical</b>	YES	NO	<b>Hydraulic</b>	Yes	NO	<b>Pneumatic</b>	Yes	NO	<b>Water</b>	Yes	NO
<b>Kinetic</b>	Yes	NO	<b>Heat</b>	Yes	NO	<b>Steam</b>	Yes	NO	<b>Chemical</b>	Yes	NO
Name and Date of Visy Delegate who performed the isolation:											
Have any Guards been removed from the Plant/Equipment?							YES		NO		
List all Guarding that has been removed:											

By Signing this document I acknowledge I have:

Been made aware of the hazards in the immediate work area  
 Had all relevant permits explained and issued to me  
 Taken action and have controls in place to minimise the risks  
 Been made aware of the location of fire fighting equipment, First Aid facilities and Emergency Procedures.

I understand and agree to abide by the above conditions and that any misconduct may result in disciplinary action and or removal from site.

Sign on	Time	Date	Sign off	Time	Date	Works Completed Incomplete

Contractors MUST ensure that on completion of works the Plant/Equipment MUST be handed over to the site with NO known Risks. If there are any Known / existing Risks then the sites Contractor Manger/Delegate must be advised and all Known risks Documented hereunder.  
 If there are no Risks simply write – **NO KNOWN RISKS** in this section.

Have all Guards as listed in page 1 of this document been replaced and functioning as designed?	YES	NO	NA
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**If NOT ensure that all Guarding is replaced/fitted to the Plant/Equipment before removing the Isolation**

Does the area require any housekeeping?	YES	NO
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**If YES then ensure that all relevant housekeeping is undertaken**

Contractors Name	Contractors Signature
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**This Form MUST be returned to the Visy Contractor Manager / Delegate**

**CONTRACTORS TO COMPLETE THIS SECTION**

**Visy Contractor Manger/Delegate to ensure all relevant Permits – Copies of JSEAs/SWMS have been collected and kept for verification and auditing purposes.**

**A complete check of the Plant/Equipment is to be undertaken prior to removing any Isolation(s). If the Plant/Equipment is not Safe to operate then the Isolation MUST remain in place.**