VUL-FRM-19-18-Low Voltage (LV) Live Testing Work Permit

Date:		Time:		Work Order #	

Section 1 – Permit Holder Information					
Name:		Company:		Phone No:	

Section 2 – Scope of work	
Work area/location	
JHA #	
Electrical Workers involved in the task	

Section 3 – Permit holder work checks				
Item	Details	YES	NO	Comments
Drawings	Drawings examined (as built)	☐	☐	
Tools	All tools being used have approved insulation rating or are non-conductive.	☐	☐	
Equipment	Equipment is in safe working condition Test equipment calibration is current	☐	☐	
Obvious exposure risk	Damaged equipment identified and removed	☐	☐	
LIVE testing PPE	Arc flash PPE where the site has an arc flash risk OR full-length flame-resistant clothing, safety footwear	☐	☐	
Worn/carried items	All worn/carried conductive personal items removed (e.g. rings)	☐	☐	
Voltage	Voltage is below 1200v AC or 1500v DC	☐	☐	
Concealed exposure risk	Concealed services identified, located and isolated	☐	☐	
Developing exposure risk	Controls in place where work activities could create additional hazards	☐	☐	
Isolation point	Isolation point identified; any obstacles removed	☐	☐	
Barricades	Entrances to area barricaded to prevent unauthorised access	☐	☐	
Signage	Signs erected to prevent unauthorised access	☐	☐	
Barriers/covers	Insulating barriers/covers used over live components not being worked on	☐	☐	
Insulation mats	All work will be conducted on insulation mats	☐	☐	
Dry area	Walls, floor, equipment around work area are dry	☐	☐	
Lighting	Adequate lighting in and around work area	☐	☐	
Electrical Support Person	Electrical Support Person provided	☐	☐	

Rescue kit	An in-date LV rescue kit has been placed at the work area for use by the Electrical Safety Observer	☐	☐	
Fire extinguisher	Dry powder fire extinguisher provided for use	☐	☐	
JHA Instruction	A JHA instruction produced to identify hazards, assess risk and document controls	☐	☐	
Briefing	All people conducting the work have been briefed in JHA work instruction	☐	☐	
Capability	I am capable of supervising the Permit Users to safely conduct the work under this permit	☐	☐	
Emergency Response	Required controls identified and recorded	☐	☐	
Other		☐	☐	
Section 4 – Permit Issuer – Checks				
Barricades and signage	I have verified there are sufficient barricades and signs in place to restrict unauthorised access	☐	☐	
Isolation point	I have checked the isolation point and confirm it is tagged/locked, and access is unobstructed	☐	☐	
Electrical Support Person training	I have undergone LV rescue and resuscitation training within the last 12 months.	☐	☐	
Rescue kit	I have inspected the LV rescue kit. It is complete and in test date	☐	☐	
Fire extinguisher	Dry powder fire extinguisher provided has been inspected/ stamped within the last six months	☐	☐	
Briefing	I have been briefed in JHA/SWP instructions	☐	☐	
Capability	I am capable of meeting my duty as a Electrical Safety Observer for the entire duration of the work.	☐	☐	
Live testing is necessary	I believe that, in the interests of safety, this work must be undertaken live	☐	☐	
Safe system of work	I have reviewed and approved the JHA/SWP for this work	☐	☐	
Confirmation of controls	I have inspected the work area and verify that the controls documented in the JHA/SWP and Section 2 of this permit are in place	☐	☐	
Qualifications	I have verified that people doing the work, and the Electrical Support Person are site authorised and competent.	☐	☐	
Section 4	Section 4 has been completed with all answers being 'Yes' or 'N/A'	☐	☐	
Other		☐	☐	

Section 5 – Permit approval and acceptance

I, the PERMIT ISSUER, approve this LV test permit to enable safe access to, and testing

Name	Title	Signature	Date

I, the PERMIT HOLDER, understand the controls required herein to ensure the health and safety of Permit Users and will supervise the work to ensure controls are implemented and adhered to.

Name	Title	Signature	Date

Section 6- Permit user sign on/sign off

I understand and accept the conditions of this permit and will work within the requirements stated herein. I understand that my permission to work under this permit is relinquished when I have signed off the permit.

Sign on			Sign off		
Name	Signature	Date	Signature	Date	Time

Section 7 – Withdrawal of Permit

I, the PERMIT HOLDER, have confirmed the work is complete, all Permit Users are clear of the area and have signed off on this permit, and the area is returned to standard running conditions.

Name	Title	Signature	Date

I, the PERMIT ISSUER, have inspected the work area and confirm the work is complete. I hereby withdraw this permit.

Name	Title	Signature	Date