



**CONTRACTOR CONFINED SPACE ACCESS REQUEST FORM PF721**

The contractor must ensure:

- Documented site-specific Risk Management Plans prior to commencing work.
- Implementation of their own WHS management systems and permit systems for the works and sites in their control
- Completion of UQ inductions for all their workers and sub-contractors working under their systems of work.
- All workers are suitably trained, qualified, and licensed to conduct works being undertaken.
- Control measures and precautions appropriate for the safe access and execution of the work in or around the confined space have been implemented and persons required to work in or around the confined space have been advised of and understand the requirements of this written authority.

**Form Lodgement**

- Lodge form with relevant Client Facility Manager (CFM) or Project Manager (PM).
- The CFM or PM is responsible for approving this authorisation prior to commencement of work. It is valid only for the date and time specified. When the work is complete or authorisation to access expires, the authorised person for the confined space work must sign off.

**Company Name:** \_\_\_\_\_

**Contractor's coordinator name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Contractor's person in control of work:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Area of work/roof location:** \_\_\_\_\_

**Have your workers undertaken the UQ induction?** Yes  No   
 Note: Confined space access is not authorised without induction

**Date(s) of work:**        /        /        **Start time:** \_\_\_\_\_  
                                      /        /        **Finish Time:** \_\_\_\_\_

**Description of works:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Contractors must read and sign:**

- I/We have been advised of and understand the known and foreseeable hazards and control measures and precautions to be observed when entering and working on the confined space.
- I/We acknowledge that persons entering and working will be required to work under the contractor's management system and permits.
- I/We understand that this documented authority only covers the permission from P&F to access the confined space based on the known and foreseeable hazards and the affirmation by the contractor that their workers are competent, and their systems are adequate for the intended work.
- I/We affirm that all persons (workers and subcontractors of the contractor) are competent, all procedures, isolations, and Emergency Response Plans (ERP) required for the safe entry and execution of the work in this confined space are relevant, current, and independent of UQ Security and Emergency Services. The work area shall be checked and secured on completion of activities.

**Contractor's Confined Space Access Supervisor**

**Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:**        /        /

**Sign in/out**

- All contractors are required to sign in/out at Security Control when completing works on site.
- Failure to sign in and out may result in inductions being cancelled requiring re induction.

**Client Facility Manager/  
Project Manager:** \_\_\_\_\_ **Name:** \_\_\_\_\_  
 \_\_\_\_\_ **Approved:** Yes  No   
 \_\_\_\_\_ **Comments:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:**        /        /