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| **Section 1 – Work activity details** | | | | | |
| **Work activity title** |  | | **SAA No.** |  | |
| **Location of work activity** | Site:  Location at site: | | **PID or W/O No.** |  | |
| **Details of work activity** |  | | **Planned start date** |  | |
| **Planned end date** |  | |
| **Work Coordinator** | **Name:** | **Mobile:** | | | |
| **Email:** | | | | |
| **Contractor or company** |  | | **Principal Contractor (PC) appointed?** | | Y  N |
| **Contractor representative** | **Name:** | **Role:** | | | |
| **Email:** | **Mobile:** | | | |

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| **Section 2 – MWP trigger details\***  (Work Coordinator to complete) | | |
| **MWP Trigger** | | **Description of the risk** |
| Water supply impacted | Y  N/A |  |
| Water quality / ability to monitor impacted | Y  N/A |
| Flood management asset impacted | Y  N/A |
| Seqwater discretion | Y  N/A |

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| **Section 3 – Risk controls**  (Work Coordinator to complete) | | |
| **Water supply and water quality risk controls** | | **Details and supporting documentation** |
| Minimum reservoir levels required prior to work commencing | Y  N/A | Reservoir names:  Minimum reservoir levels:  Minimum time for restoration:  Supporting documentation location: |
| Reduced output from a WTP | Y  N/A | Period of reduced output:  Date network approval given:  Network contact for work:  Minimum time for restoration: |
| Reconfiguration of the network required | Y  N/A | Reconfiguration required:  Date network approval given:  Network contact for work:  Supporting documentation location: |
| Tankering of water supplies  [Tankering of Drinking Water Supplies Procedure (PRO-01455)](trim://CP/3088033/0) | Y  N/A | Period of tankering required:  Company providing water:  Controls / security at site:  Minimum time for restoration:  Supporting documentation location: |
| **Water supply and water quality risk controls** | | **Details and supporting documentation** |
| Planned disruption to water supply requiring community notification | Y  N/A | Customer notification requirements (set by Standards of Service or Water Supply Scheme Service Targets):  Date Customer and Community Relations Notified:  Customer and Community Relations Contact: |
| Additional disinfection and water quality sampling / testing required during work | Y  N/A | Disinfection requirements:  Grab samples required for duration of work:  Minimum time for restoration:  Supporting documentation location: |
| **Flood management asset risk controls** | | **Details and supporting documentation** |
| Flood Infrastructure Removal from Service Permit Approval Form ([FRM-00791](trim://CP/3086660/0)) | Y  N/A | Date approved by Senior Flood Engineer:  Supporting documentation location: |
| Regulatory approval required | Y  N/A | Regulator name:  Date regulatory approval given:  Supporting documentation location: |
| **Other planned risk controls** | | |
| Rollback Plan ([TEM-00126](trim://CP/3086499/0)) required | Y  N/A | Supporting documentation location: |
| Other required risk controls: | | |

**An electronic copy of this permit must be attached to the site access request in PASS. The relevant operational coordinator will approve this permit in CIS. This approval must be obtained prior to arrival at site.**

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| **Section 4 – Activate MWP**  (Work Coordinator to complete) | | | | | |
| 4A – Approval to commence MWP activities | | | | | |
| All approvals obtained - Access Officer confirmed work activity can proceed | Y  N/A | Permit activation number | | | \_ \_ \_ \_ \_ \_ \_ \_ \_ |
| Access Officer name |  | | Date / time | |  |
| 4B – Implementation of isolations | | | | | |
| Required isolations completed | | | | | Y  N/A |
| **Permit Activated**  I have confirmed with Operations that work can commence and have confirmed that required risk controls and isolations have been implemented. I confirm that the permit receiver is able to conduct the work activity defined in Section 1 of this permit in accordance with the requirements of this MWP and all supporting documentation. | | | | | |
| Work Coordinator | **Name:** | | | **Signature:** | |
| **Date:** | | | **Time:** | |

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| **Section 5 – Receive MWP**  (MWP Permit Recipient to complete) | | |
| **Permit Received**  I have discussed the specific hazards and controls with the work coordinator and agree that the work activity is safe to proceed in accordance with the requirements of this MWP and all supporting documentation.  I understand and accept all of the conditions of this MWP and supporting documentation. | | |
| MWP Permit Recipient | **Name:** | **Signature:** |
| **Date:** | **Time:** |

| **Change in Permit Recipient** | | | | | | | |
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| **New Permit Recipient Sign On** | | | | **Old Permit Recipient Sign Off** | | | |
| **Date** | **Time** | **Name** | **Sign** | **Date** | **Time** | **Name** | **Sign** |
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| **Section 6 – Extended MWP**  (MWP Permit Recipient to complete) | | | |
| New completion date |  | New completion time |  |
| Reason for MWP extension: | | | |
| Approved by Operations Coordinator | Y  N | Operations Coordinator name |  |
| Access Officer notified | Y | Access Officer name |  |

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| **Section 7 – Surrender MWP**  (MWP Permit Recipient to complete) | | |
| **Permit Surrendered**  I confirm that work associated with this MWP is complete, all workers, tools and equipment have been removed from the work area, project area has been made safe, assets affected by the project are available for use by Operations with known defects communicated. | | |
| MWP Permit Recipient | **Name:** | **Signature:** |
| **Date:** | **Time:** |

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| **Section 8 – Close MWP**  (Work Coordinator to complete) | | | | |
| All risk controls removed | Y  N | Isolations removed | | Y  N |
| Access Officer notified that the asset can be returned to service | Y  N | Permit closure number | | \_ \_ \_ \_ \_ \_ \_ \_ \_ |
| Access Officer name |  | | **Date / time** | |
| **Permit Closed**  I confirm that work associated with this MWP is complete, all workers, tools and equipment have been removed from the work area, project area has been made safe, assets affected by the project are available for use by Operations with known defects communicated and the MWP is closed. | | | | |
| Work Coordinator | **Name:** | | **Signature:** | |
| **Date:** | | **Time:** | |

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| **\*MWP Trigger Details** | |
| Water Supply | * Sole source WTP – work activity will disrupt, or has a high risk of disrupting the continuous supply of drinking water to customers * Networked WTP – work activity will result, or has a high risk of resulting in water storage reservoirs falling below normal operating levels * Network Assets – work activity will result, or has a high risk of resulting in the disruption of continuous drinking water supply to customers * Raw Water Off-takes / Raw Water Mains – work activity will impact, or has a high risk of impacting the supply of raw water to a WTP * Third Party Activities – work activity undertaken by a third party that will impact, or has a high risk of impacting on the operation of drinking water supply assets (i.e. excavations adjacent to Seqwater mains, water retailer operations, electricity disruptions, telecommunications disruptions) |
| Water Quality / Water Quality Monitoring | * Raw Water Quality – work activity will impact, or has a high risk of impacting the raw water quality at a WTP intake (not including dam releases) * Produced Water Quality – work activity will impact, or has a high risk of impacting the quality of drinking water produced from a WTP * Water Quality Monitoring – work activity will prevent, or has a high risk of preventing the monitoring drinking water quality critical control points (does not include routine maintenance tasks, e.g. cleaning and calibrating a turbidity meter) |
| Flood Management Assets | * Dam Gates – work activity will prevent, or has a high risk of preventing the ability to control releases of water from a dam gate * Structural Integrity – work activity will impact, or has a high risk of impacting the structural integrity of a flood management asset * Change in Storage Level – work activity will result, or has a high risk of resulting in a change in the storage level of a flood management asset * Third Party Activities – work activity undertaken by a third party that will, or has a high risk of impacting on the operation of flood management assets (i.e. electricity disruptions, telecommunications disruptions) |
| Seqwater Discretion | * A manager may require that a MWP be used to manage any work activity due to specific risks associated with the work activity. |