



REQUEST FOR PERMISSION TO CARRY OUT HOT WORK ON BOARD A VESSEL / SHIP OR ON ADJACENT QUAY / BERTH

PORT: _____	LOCATION: _____
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From _____ (person in charge of hot work)

Tel no. _____ Mobile no. _____ Fax no. _____ Email. _____

Date: _____ Time: _____

Permission is requested to carry out the following Hot Work at _____
(Vessel / Location)

On _____ Date _____ From _____ hrs to _____ hrs

Details of proposed Safe Systems of work (eg. Tests for flammable vapours, first-aid, firefighting, etc.)

Details of Dangerous Substances in the vicinity of proposed work:

I confirm that this work is managed by me and will be carried out in accordance with all appropriate legislation and codes of practice, in particular the following:-

- Bulk Liquid Carriers**
The Guidelines contained in the International Safety Guide for Oil Tankers and Terminals
- Dry Cargo Vessels**
Code of Safe Working Practice for Merchant Seamen published by Marine Coastguard Agency

Chapter 16 – Permit to work Systems

Chapter 23 – Hot Work
- The Ship Building and Ship Repair regulations 1992**
- The Management of Health & Safety at Work Regulations 1999**
- HSE Information Sheet**

Dock Sheet No. 6 – Hot work at Docks DIS6(rev1) 10/08

IF WORKING ON VESSEL – HAS MASTER’S WRITTEN PERMISSION BEEN GIVEN?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
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GAS FREE CERTIFICATE – DO BOTH YOU AND VESSEL’S MASTER HAVE ONE?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
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ABP RESPONSE

 REQUEST GRANTED

 REQUEST DENIED

Special Conditions:

Print Name: _____ Signature: _____ Position: _____

Date: _____ Time: _____

COMPLETED FORM TO BE RETURNED TO HARBOUR MASTER / DOCK MASTER.