

10.2.WH.I.RC.Permit - Dust Work

Contractor					Part 1 – Contractor's onsite responsible person for dust work to complete				
This permit must be completed for all dust work associated with cleaning, maintenance, repair, improvement, demolition or construction that produces significant quantities of dust, airborne particles or steam, which could affect the building and its fire systems or have the potential to become a nuisance or hazard to the building occupants, visitors, contractors or general public (e.g. odours sucked into the air intake system/s). This permit is NOT for dust work created from hot work (hot work may involve grinding, welding, thermal or oxygen cutting or heating, and any other heat-producing or spark producing operation). The permit must be prominently displayed at the onsite work area and returned to the Brookfield Facilities Manager/Supervisor, or authorised representative on completion of work for sign off and filing.									
Site Name & Address:									
Name of "Contractor's onsite responsible person for dust work" (first & last name) (Please Print):							Phone No:		
Business/Company Name performing the dust work ("the Contractor"):							Will hot work be undertaken?	Yes	No
Dust work location (e.g. room, area):					Is a fire isolation / impairment needed or required?		Yes	No	
Brief description of the dust work (e.g. sanding of Gyprock plaster joints):					Will dust work be undertaken in a confined space?		Yes	No	
					If fumes are produced, are control measures in place?		Yes	No	
NOTE: This Dust Work Permit is valid for a MAXIMUM of 12 hours.							Number of workers:		
Date permit is valid for:			Permit start time:			Permit stop time (i.e. expiry time):			
Statement by the "Contractor's onsite responsible person for dust work"									
I will implement the applicable precautions contained in Part 3 of this permit, and any other necessary precautions. I will ensure that all relevant parts of this permit are completed. I will inspect the worksite both prior to starting dust work and afterwards. I have undertaken a site specific risk assessment and confirm that I will implement the control measures necessary to ensure that it is safe for dust work to be carried out. I have consulted with the Brookfield Facilities Manager/Supervisor in this regard. I have arranged for Brookfield Commercial Operations to isolate (or impair) the relevant parts of the fire protection or detection system (e.g. smoke detectors), if required. I hereby confirm that all persons involved in the dust work that are managed or controlled by the Contractor are properly supervised and are competent to perform the work.									
I will notify the Brookfield Facilities Manager/Supervisor or Brookfield's nominated representative when the fire isolation (or impairment) of the smoke detectors and other associate parts of the fire system can be de-isolated and/or restore to normal operation. Furthermore, I agree to remain onsite until such time as the fire protection/detection system (e.g. smoke detectors, fire panel, VESDA) is restored to normal operation, and such normal operation is confirmed with me. Note: Any changes to this arrangement must be pre-arranged and agreed to in writing by the Brookfield Facilities Manager.									
Name of "Contractor's onsite responsible person for dust work" (first & last name) (Please Print):					Signature (<u>no</u> digital signature):		Date:		
							Mobile #:		

Brookfield		Part 2 – Permit Authorisation		Permit #:
Dust work area has been inspected and the relevant parties/persons have been consulted. Dust work permit reviewed, authorised and issued by Brookfield Permit Issuer (<i>a Brookfield Commercial Operations authorised staff member</i>):				
Name (first & last) (Please Print):		Signature:		Date:
				Time:

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Contractor	Part 3 – MUST be completed by the “Contractor’s responsible person for dust work” prior to starting dust work	Permit #:
<p>Dust work is authorised to proceed subject to permit authorisation (sign off in Part 2), and subject to adhering with the aforementioned conditions (in Part 1), and subject to taking the precautions outlined below, unless it is not reasonably practicable to do so. Check boxes are to be marked accordingly by the Contractor prior to undertaking dust work. For each precaution, one of the two check boxes (i.e. “Yes” or “N/A”) is to be marked. It is the responsibility of the Contractor’s responsible person for dust work to ensure that adequate control measures are implemented to minimise the risk to health and safety and the risk of property damage. Work is not to commence unless each of the precautions below have been adequately addressed. If work is commenced and precautions have not been addressed and/or the check boxes have not been marked, the Contractor will be in breach of the conditions and other subject matters of this dust work permit.</p>		

Precautions taken	Yes	N/A	Precautions taken	Yes	N/A
In the work area, has the smoke detection equipment (e.g. smoke detectors) been isolated ?	<input type="checkbox"/>	<input type="checkbox"/>	Have all workers involved in dust work been fully briefed on the hazards and associated controls?	<input type="checkbox"/>	<input type="checkbox"/>
Have smoke detection devices (e.g. smoke detectors) been suitably covered/ protected to prevent the entry of dust and/or other contaminants?	<input type="checkbox"/>	<input type="checkbox"/>	Has the work area/space been cordoned off and made dust proof to prevent adjacent areas/spaces becoming contaminated with dust?	<input type="checkbox"/>	<input type="checkbox"/>
If dust work could become a nuisance and/or there are building air intake system/s present, has an impact minimisation plan been agreed?	<input type="checkbox"/>	<input type="checkbox"/>	For dust produced (e.g., airborne contaminants), or for any hazardous chemicals used, are MSDS/ SDS readily available?	<input type="checkbox"/>	<input type="checkbox"/>
Will dust extraction device/s, e.g. suitable vacuum cleaner/s , be used to minimise dust contamination?	<input type="checkbox"/>	<input type="checkbox"/>	Have adequate control measures been implemented (e.g. PPE use; area sealed off from adjacent areas)?	<input type="checkbox"/>	<input type="checkbox"/>

Contractor	Part 4 – After completing dust work – Brookfield is to be notified of completion of dust work and the permit is to be returned to Brookfield	
<p>(1) I acknowledge that the fire detection/protection system is not to be left isolated overnight. (2) I will promptly return this permit to the Brookfield Facilities Manager/Supervisor or nominated representative. (3) The dust work area is now safe and able to resume normal operation. (4) I will remain onsite until such time as the fire system (e.g. smoke detectors, fire panel, VESDA) is restored to normal operation, and such normal operation is confirmed with me. Note: Any changes to this arrangement must be pre-arranged and agreed to in writing with the Brookfield Facilities Manager.</p>		
The person notified that the fire system (e.g. smoke detectors) can be restored to normal operation: Name: _____ Date: _____ Time: _____		
Part 4 be completed by the “Contractor’s onsite responsible person for dust work”		
Name (first & last) (Please Print):	Signature:	Date:
		Mobile:

Brookfield	Part 5 – De-isolating the fire system & finalising the permit	
<p>To be completed by the Brookfield Facilities Manager/Supervisor or nominated representative. Also, check that previous parts of this permit have been adequately completed.</p>		
<p>FINAL CHECK: I confirm that: (1) Following completion of the dust work, smoke detectors and any other parts of the fire detection, protection system and equipment that were isolated for the purposes of the dust work have now been restored to normal operation. (2) The fire isolation register in the Fire Control Room has been completed, including the de-isolation. (3) The site is now safe and able to resume normal operation.</p>		
Name (first & last) (Please Print):	Signature	Date:
		Time: