

Work Permit Number: _____
(OFFICE USE ONLY – Interlink Roads)

Part A – Application Details

Please complete & email back to Interlink Roads at least one week before commencement of works. Failure to meet deadlines may see this permit rejected or delayed. IF SPACE DOES NOT PERMIT, PROVIDE DETAILS ON SEPARATE PAPER

Application Submission Date:	Applicant's Name:	Company:	Contact No:
			E-mail:
PERMIT START Date: Time:		PERMIT FINISH Date: Time:	
The applicant is carrying out work for (i.e. company name, if not for Interlink Roads):		Contact Name:	
Contractor company name: (doing the actual work)	Contact person:	Contact No:	
		E-mail:	
	On-site Supervisor:	Mobile No:	
		E-mail:	

Description of Work:

Location of Work: <input type="checkbox"/> Eastbound <input type="checkbox"/> Westbound <input type="checkbox"/> Northbound <input type="checkbox"/> Southbound	From: (e.g. Heathcote Rd)	To: (e.g. Moorebank Ave)	Building/Structure:
<input type="checkbox"/> Left Lane <input type="checkbox"/> Middle Lane <input type="checkbox"/> Right Lane <input type="checkbox"/> Shoulder <input type="checkbox"/> Ramp Through Lane (Ramp Closure) <input type="checkbox"/> Ramp Shoulder Lane <input type="checkbox"/> Other			
Proposed Plant & Equipment:			
Does the work require traffic control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Traffic control procured by	<input type="checkbox"/> Applicant <input type="checkbox"/> Other, provide details <input type="checkbox"/> Interlink Roads
RMS Road Occupancy License Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	ROL Number:	

Part B – Mandatory Works Details

Is the cost of the Construction Work equal to or greater than \$250,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you (Applicant) been nominated as the Principal Contractor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has a construction methodology plan been prepared and submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Has the job specific Safe Work Method Statement (SWMS) been prepared and submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No SWMS No:
Does the work have an impact on the environment?	<input type="checkbox"/> Yes <input type="checkbox"/> No (if Yes, seek advice from ILRs representative)
Do you have an existing subcontractor agreement?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you provided copies of your Workers Compensation & Public Liability \$20m? Insurance Certificates of Currency?	<input type="checkbox"/> Yes <input type="checkbox"/> NO (if No, please provide copies)
Have all workers been inducted to Interlink Roads Sites?	<input type="checkbox"/> Yes <input type="checkbox"/> No (if No, please arrange for Induction prior to works.)

Special Permits

Does the work require Working at Heights?	<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please provide additional permit)
Does the work require "hot works"? (welding, soldering, cutting, brazing, grinding)	<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please provide additional permit)
Does the work require Excavation or Ground Penetration?	<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please provide additional permit)
Does the work require Energy Isolation?	<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please provide additional permit)
Does the work require Working in Confined Spaces?	<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please provide additional permit)
Is the work carried out in or near water or other liquid that involves a risk of drowning	<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please provide additional permit)

When completed and signed off, the permit must be kept in the possession of the person carrying out the work at the job site until completion.

Part C – Applicant’s Certification

I certify that all information contained herein is true and accurate. I acknowledge that I have read, understood and accepted the Interlink Roads General Risk Assessment, Site Safety Induction and Site Access Conditions. I certify that any/all Safe Work Method Statements, Environmental Assessments as described in this application form, have been considered and reviewed, and that the said works will be conducted in accordance with these documents and work procedure provided.

Applicant’s Name:	Signature:	Date:
Contractor’s Supervisor Name:	Signature:	Date:

Part D – Authorisation of Works

Works Authorisation (Interlink Roads):
The works authoriser certifies that relevant Safe Work Method Statements, Environmental Assessments and ‘other’ permits as described in this application form, have been considered and reviewed, and that the said works may proceed in accordance with these documents and the work procedure provided.

Authorising Officer:	Signature:	Date:
Interface Works: <input type="checkbox"/> M5/M5E or <input type="checkbox"/> M5/M7	If yes forward permit to respective Control Towers	
Operations Manager*	Signature:	Date:
*Authorisation from the Operations Manager is required if the works involve any of the following: <input type="checkbox"/> Full motorway closure <input type="checkbox"/> Full remote ramp closure <input type="checkbox"/> Any lane closure		
IT Manager**	Signature:	Date:
**Authorisation from the IT Manager is required if the works involve any of the following: <input type="checkbox"/> Works impact IT infrastructure <input type="checkbox"/> Works impact Tolling infrastructure <input type="checkbox"/> Works impact OMCS infrastructure		
General Manager***	Signature:	Date:
***Authorisation from the General Manager is required if the works involve any of the following: <input type="checkbox"/> Full motorway closure		
Comments:		

Part E OFFICE USE ONLY – Interlink Roads (Operational Coordination)

Distribution for information only

<input type="checkbox"/> Duty Controller (Mandatory)	<input type="checkbox"/> Operations Manager	<input type="checkbox"/> Other
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