

White	Book
Pink	Contractor
Yellow	Service Centre

UOW ADMINISTRATION

ROOF ACCESS PERMIT

APPLICANT TO DOWNLOAD THIS PERMIT, COMPLETE AND FORWARD TO AUTHORISED FACILITIES MANAGEMENT OFFICERS 24 HOURS PRIOR TO REQUIRING ACCESS.

PERMIT DETAILS

Campus: Wollongong Innovation Campus Shoalhaven Batemans Bay Bega Moss Vale Loftus
 Other:

Permit type: Short Term Access Long Term Access
 (If you require long term access only complete the Permit Details section and submit for approval)

Building number: _____ **Date access from:** _____ **Date access to:** _____

Organisation / person requiring access: UOW Other:

Description of work to be undertaken:

Organisation / person requesting work to be undertaken:

ROOF ACCESS REQUIREMENTS (to be completed by person requiring access to roof)

List persons requiring access to the roof:

1.	4.
2.	5.
3.	6.

Has the UOW Roof Safety Survey been reviewed for the building being accessed?

Yes No (undertake or review risk assessment)

Will the work being undertaken require additional controls not covered by the Roof Safety Survey?

Yes (Complete a Risk Assessment and Safe Work Procedure) No (Submit permit for approval)

Has a rescue plan been put in place for work that requires the use of fall arrest systems?

Yes (attach to permit) No (access will not be granted if fall arrest systems are required) Not required

APPLICANT

Have access controls been implemented in accordance with the Roof Safety Survey :

Yes No - explain:

Name: _____ **Signed:** _____ **Date:** / /

AUTHORISED UOW OFFICER

Does the applicant's WHS management system satisfy UOW roof access and working at heights requirements?

Yes No

Are additional risk assessments required to be completed for the work being conducted on the roof?

Yes No

Roof access: Authorised Declined

Name: _____ **Position:** _____

Signed: _____ **Date:** / /