APPLICATION FOR: PERMIT TO WORK (PTW) / STATEMENT OF ISOLATION OF LOW VOLTAGE (SILV)

No: J

To be issued to persons who are not employed by, or contracting to, a member of the Victorian Electricity Supply Industry (VESI).

☐ VESI Network Operator Assets (PTW) ☐ Customer Assets (SILV)

From: Name..... Company ..... Tel: Bus hrs .....

Address ..... AH .....

INFORMATION

1. A permit for work to proceed and a safety clearance are required for work as detailed below.
2. **Site:** Street No. ..... Street Name..... Suburb/Town..... Postcode .....
2. **Location of work** eg. between asset no's .....
3. **Description of work** (including reference to drawings, sketches, types of construction equipment to be used, apparatus and/or plant to be used on and other particulars)

   .....

   .....

   .....

EXAMPLE ONLY
NOT TO BE USED

4. Commencement: Time..... Date ...../...../.....
5. Completion: Time..... Date ...../...../.....
6. The apparatus is required on the following basis (i) Continuous YES ☐ NO ☐

   If NO (ii) Daily times of access: from ..... to .....
7. Person in charge of working party .....

DECLARATION

8. I agree to adhere to the dates and times nominated above whilst carrying out the work described above.
9. I acknowledge that the VESI Network Operator reserves the right to make a charge to cover its costs associated with preparations and/or permit of use.
10. I understand that I will be advised prior to the permit being made available whether a charge will be made in this case.
11. I agree to indemnify the VESI Network Operator against all injuries to persons, claims for damage, or loss of property in any way arising out of the proposed work or incidental to it.

Name.....Signed .....Date ...../...../.....

FOR USE BY VESI NETWORK OPERATOR

1. Referred to.....
2. Comment and action .....

   .....

   .....
3. Operational requirements

   (i) An Electrical Access Permit/Vicinity Authority IS / IS NOT required to support the above proposed action.

   (ii) An Application for EAP/VA form No. ..... has been submitted to the appropriate operating authority.

   (iii) ..... has been nominated as the Recipient-in-Charge.

Name.....Signed .....Date ...../...../.....

4. Issuing Authority's Record

Name.....advised these particulars and instructed to issue.

Signed .....Date...../...../.....

Advised by.....that Permit to Work No. ..... was issued at Time.....Date ...../...../.....

Name.....Signed .....

Advised by.....that Permit to Work No. ..... was cancelled at Time.....Date...../...../.....

Name..... Signed.....

Green copy: to accompany operations application White copy: for local file Yellow copy: for customer (Non VESI Network personnel)