



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

<b>PORT:</b> _____	<b>LOCATION:</b> _____
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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
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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:-

- 1. Bulk Liquid Carriers**  
The Guidelines contained in the International Safety Guide for Oil Tankers and Terminals
- 2. 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
- 3. The Ship Building and Ship Repair regulations 1992**
- 4. The Management of Health & Safety at Work Regulations 1999**
- 5. 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="button" value="YES"/>	<input type="button" value="NO"/>
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GAS FREE CERTIFICATE – DO BOTH YOU AND VESSEL’S MASTER HAVE ONE?

<input type="button" value="YES"/>	<input type="button" value="NO"/>
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**ABP RESPONSE**



Special Conditions:

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Position: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

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