

HEXATECH ENGINEERING SDN. BHD.	PROJECT DEPARTMENT	Issue No.: 1	Document Effective Date: 01 Nov 2021	Page 1 of 4
	<b>Work Permit Form</b>	Revision No.: 0		Document Ref.: PD-REC-WPF


**PART 1 - WORK PERMIT APPLICATION BY CONTRACTOR**

Project Name:			Application Date:	
Subcontractor Company Name:	Subcontractor Applicant / PIC Name:		Handphone No.:	
Location of Work:				
Scope of Work:				
Work Schedule (Permit valid for 7 days only):	Start Date:	End Date:	Note: Need to re-apply new permit after 7 days.	

No.	Worker Full Name	I.C. / Passport No.	No.	Worker Full Name	I.C. / Passport No.
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

Type of Work Requested (refer to list overleaf) Tick only one:	<input type="checkbox"/> Cold Work	<input type="checkbox"/> Hot Work	<input type="checkbox"/> Work At Heights	<input type="checkbox"/> ST Work Permit	<input type="checkbox"/> Confined Space Work
	<input type="checkbox"/> Others: _____		Other Obtained Work Permit No. & Date: _____		
Required Supporting Documents:	<input type="checkbox"/> Safe Work Method Statement	<input type="checkbox"/> Job Safety Analysis	<input type="checkbox"/> Certificates		
	<input type="checkbox"/> Material Safety Data Sheet	<input type="checkbox"/> Others: _____			
Work Safety Training Attended & Practices:	<input type="checkbox"/> Safety Induction Training (HE)	<input type="checkbox"/> Inhouse Safety Training	<input type="checkbox"/> Electrical Safety Training		
	<input type="checkbox"/> Others: _____				
Personal Protective Equipment & Health Status Required:	<input type="checkbox"/> Safety Helmet	<input type="checkbox"/> Safety Goggle	<input type="checkbox"/> Safety Harness	<input type="checkbox"/> C19 Self Test Kit Record	
	<input type="checkbox"/> Safety Footwear	<input type="checkbox"/> Face Shield	<input type="checkbox"/> High Visibility Vest	<input type="checkbox"/> Others: _____	
Engineering Control: (Example: Barriers, Scaffolding, fire extinguishers, etc.)					<input type="checkbox"/> Delivery Vehicle >20ft >10ton.
					<input type="checkbox"/> Fork/Sky/Boom/Genie Lift Used.
					<input type="checkbox"/> Calibrated Instruments & Tools.
Precautions to be taken: (Example: tapping of power supply, safe use of power tools, hoarding to prevent theft, noise control, etc.)					<input type="checkbox"/> Lock Out Tag Out.
					<input type="checkbox"/> Power Tools Checklist.
					<input type="checkbox"/> Structural drilling/coring.

I, the undersigned, shall adhere to safe work and health at all time involving me and my workers in addressing potential hazards and take necessary safety precautions to prevent spread of Covid-19 and any unwarranted work related accident or incident. I shall be responsible for any damage, accident or incident resulting from our negligence or omissions during the course of work.

Applicant Signature: \_\_\_\_\_ Subcontractor Company Name: \_\_\_\_\_ Subcontractor Company Stamp: 

Name: \_\_\_\_\_

Appointment: \_\_\_\_\_

**PART 2 - WORK PERMIT APPROVAL BY WORK SAFETY ADMINISTRATION DEPARTMENT (HEXATECH ENGINEERING SDN. BHD.)**

Note: The Work Safety Administration Department may counter-propose any additional control measures as when and where required, and may impose 'Stop Work Order' if the execution of work by contractor are found to be unsafe or conducted outside of the scope of work as specified herein.

Remarks:	Verification by PM / PE / SS (type of permit applied):
	<input type="checkbox"/> Cold Work Permit <input type="checkbox"/> ST Work Permit
	<input type="checkbox"/> Hot Work <input type="checkbox"/> Confined Space Work
	<input type="checkbox"/> Work At Height <input type="checkbox"/> Other:

Approved by:	The below 'Work Permit No. & Date' is issued by:
Signature:	Signature:
Name:	Name:
Appointment: PM / PE / SS (HE)	Appointment: Site Safety Supervisor (HE)
Date:	Date:

<b>Work Permit No.:</b>	<b>Date:</b>
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**(A) TYPES OF WORK PERMIT USED FOR WORK AT ASSIGNED PROJECT SITES TO SUBCONTRACTOR**

(1)	(2)	(3)	(4)	(5)
<b>Cold Work Permit</b>	<b>Hot Work Permit</b>	<b>Work At Heights Work Permit</b>	<b>Suruhanjaya Tenaga (ST) Work Permit</b>	<b>Confined Space Work Permit</b>
<ul style="list-style-type: none"> <li>Low Voltage (LV)</li> <li>Genset Installation</li> <li>Genset Maintenance</li> <li>Cabling Works - Lighting &amp; Power</li> <li>SSB, DB Installation</li> <li>Feeder Pillar</li> <li>Work at Electrical Risers</li> <li>Local / Wide Area Network - Cabling &amp; System Installation</li> <li>Wi-Fi Connectivity</li> <li>CCTV Surveillance System</li> <li>Public Address System</li> <li>Testing &amp; Commissioning of LV &amp; ELV Works</li> <li>HVAC/ACMV System</li> <li>Testing &amp; Commissioning of HVAC/ACMV Works</li> <li>Fire Protection System</li> <li>Testing &amp; Commissioning of Fire Protection System Works</li> </ul>	<ul style="list-style-type: none"> <li>Welding - Arc/Oxy</li> <li>Soldering</li> <li>Heat Inducing Operation</li> <li>Work Producing Sparks, Flames or Other Source of Ignition</li> </ul>	<ul style="list-style-type: none"> <li>Scaffolding Erection</li> <li>Use of Mobile Elevated Work Platforms (MEWP)</li> <li>Use of Skylift / Broom Lift / Genie</li> <li>High Level Lamp Pole Installation</li> <li>&gt;4m High Lighting Fitment</li> <li>&gt;4m Ladders</li> <li>&gt;4m Roof Level Works (Lightning Arrestor)</li> <li>&gt;4m Signage (Electrical)</li> </ul>	<ul style="list-style-type: none"> <li>High Tension (HT)</li> <li>Medium Voltage (MV)</li> <li>Main Switchboard (MSB)</li> <li>Energizing Electrical</li> <li>Electrical Isolation</li> <li>HT/MV/LV Lockout System</li> <li>Licensed Electrical Engineer/Supervisor Site Maintenance</li> </ul>	<ul style="list-style-type: none"> <li>Manhole Installation</li> <li>Underground Cable Laying</li> <li>Work at Narrow Spaces</li> <li>Limited Air Ventilation</li> <li>Limited Entry &amp; Exit</li> <li>Space Large Enough for One Person</li> <li>Tunnel Work (Need Gas Testing)</li> </ul>
<p>Note: For Cold Work Permit application, the Subcontractor shall only fill up Page 1 of 4 'Work Permit Form' for approval.</p>	<p>Note: For Hot Work Permit application, the Subcontractor shall fill up Page 1 of 4 and Page 3 of 4 'Hot Work Permit - Precaution Checklist' for approval.</p>	<p>Note: For Work At Heights Permit application, the Subcontractor shall fill up Page 1 of 4 'Work Permit Form' and Page 4 of 4 'Work At Heights Permit - Precaution Checklist' for approval.</p>	<p>Note: For ST Work Permit application, the Subcontractor shall fill up Page 1 of 4 of the Work Permit Form and if approved by the reviewing Project Manager (HE), the Subcontractor shall be issued another permit entitled 'Permit Menjalankan Kerja (Permit To Work) Electrical' to comply with ST regulations (Document Ref.: PD-REC-PTWE).</p>	<p>Note: For Confined Space Work Permit application, the Subcontractor shall only fill up Page 1 of 4 'Work Permit Form' for approval.</p>

**(B) CONDITIONS FOR APPLICATION OF WORK PERMIT**

Conditions:

- 1 Application for work permit must be submitted in writing three (3) working days in advance to Work Safety Administration Department (HE Technique Sdn. Bhd.).
- 2 Site Safety Supervisor (HE) will issue the approved work permit number & date upon confirming that all required documents fully completed are in order.
- 3 Subcontractor must carry together the approved work permit to obtain the Subcontractor work pass (if required) at the designated project sites.
- 4 Subcontractor must ensure that the site is clean after work each day. All rubbish and debris arising out of the works are to be removed and disposed properly and safely off-site on daily basis. Smoking is prohibited at the site at all times.
- 5 Subcontractor must place adequate warning signage and protective covering and take every precaution to ensure that the works are carried out and completed with minimum interference with customers, owners and all related parties.
- 6 Project Manager (PM), Project Engineer (PE), Site Supervisor (SS) and Site Safety Supervisor (SSS) of HE Technique Sdn. Bhd. (HE) reserves the right to terminate this work permit if the Subcontractor does not meet any of the abovementioned conditions.
- 7 If foreign nationals are employed as workers, the Subcontractor is required to provide copy of work permits issued by the Immigration Department of Malaysia for the foreign nationals to be attached in their work permit form (HE) application. The Subcontractor is not permitted to allow their foreign workers to conduct installation or maintenance works at the designated project site if the Subcontractor fails to furnish the valid work permits issued for the foreign nationals by the Immigration Department of Malaysia. The Subcontractor is solely responsible for any breach and/or violation of the relevant laws and statutory provisions enforced by the relevant authorities.
- 8 Subcontractor must uphold their own Covid-19 preventive measure and strictly adhere to HE or main contractors' safety and health requirements whilst undertaking their site work. If required by HE, the Subcontractor are to submit the Covid-19 Self Test Kit Record (Document Ref.: PD-REC-CSTKR) valid for 7 days for each of their workers for work permit processing. Subcontractor may submit their worker's Polymerase Chain Reaction (PCR) Result (valid for 1 month) or Antigen Rapid Test Kit (RTK-Ag) Result (valid for 14 days) in lieu of the Covid-19 Self Test Kit Record.

**(C) FOR WORK PERMIT VALIDATION BY SITE SAFETY SUPERVISOR (SSS) (HE)**

- Subcontractor to re-apply a new work permit for extension of completion time (each permit is valid for 7 days only).
- Site Safety Supervisor (SSS) (HE) to validate that the job site is in safe condition (at the start of work / during work in progress).
- Subcontractor had informed completion of work to PM / PE and Site Safety Supervisor (SSS) (HE) for work closure.
- Site Safety Supervisor (SSS) (HE) had validated work completion and work permit closure.
- Remarks by Site Safety Supervisor (SSS) (HE) (if any): \_\_\_\_\_

Validated by:

Recorded by:

Signature:

Signature:

Name:

Name:

Appointment: Site Safety Supervisor (HE)

Appointment: Document Controller

Date:

Date:

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### Hot Work Permit - Precaution Checklist

**Note** - This Hot Work Permit is only valid as per the duration of the work schedule specified on Page 1 of 4 of this Work Permit Form. It is required for any temporary operation involving open flames or producing heat and/or sparks which includes, but is not limited to: Brazing, Grinding, Soldering, Thawing Pipe and Welding.

**Instructions:**

1. Verify precautions listed below or do not proceed with work.
2. Complete this permit and issue to person(s) performing the work.
3. Subcontractor to show this permit at hot work sites at all times.

Name of assigned contractor  
fire watch person:

Appointment:

Handphone:

**Hot Work Precaution Checklist:**

Item	Yes	No	N/A
(1) Has the fire alarm system for the floor been isolated?			
(2) Have the fire alarm devices been impaired?			
(3) Are water hoses or fire extinguishers available and in good condition with valid Bomba certificate?			
(4) Is hot work equipment in good condition?			
(5) Have flammable liquids, dust, lint and oily deposits within 35 ft. been removed?			
(6) Have gas / explosive atmosphere been eliminated? Test results:			
(7) Has the work surface area been cleaned of grease, paint, etc.?			
(8) Have combustible floors been wet down, covered with damp sand or covered with fire resistant sheets?			
(9) Have surface areas below work area been protected?			
(10) Have access ways below work area been barricaded?			
(11) Are UV shields in place?			
(12) Has enclosed equipment been cleansed of all combustibles?			
(13) Have all containers been purged of flammable liquids and vapors?			
(14) Will fire watch be provided during and for 60 minutes after work, including lunch breaks?			
(15) Has fire watch person been provided with suitable fire extinguishing devices?			
(16) Has the fire watch person been trained in use of fire extinguishing devices and in sounding alarm(s) or other emergency communications?			
(17) Has additional fire watch person been assigned to adjoining areas, above and below?			
(18) Hot work area will be monitored for 4 hours after completion of work?			
(19) Other:			
(20) Other:			
(21) Other:			
(22) Other:			

**Subcontractor Verification:** I, the undersigned, hereby verify that the assigned work location has been examined and the precautions checked on the above Hot Work Precaution Checklist had been made to minimize the chance of fire before the commencement of our work.

Signature:

Name:

Appointment: Subcontractor Representative

Date:

**Hot Work Permit Closure By PM / PE / SS (HE):**

Signature:

Name:

Appointment: PM / PE / SS (HE)

Date:

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**Work At Heights Permit - Precaution Checklist**

<b>Section A: General Requirements</b>	<b>Yes</b>	<b>No</b>
1 Every open side or opening into or through which a person may fall is covered and guarded by an effective barrier to prevent falls.		
2 Where covers are used for openings, are these covers securely fixed to prevent accidental displacement?		
3 Every open side of a staircase is provided for any person who has to work at a place from which he would be liable to fall: a) A distance of more than 2m; or b) Need buddy system.		
4 If item 1 is not practicable, other suitable means such as travel restraint systems or fall arrest systems should be provided. (Refer to Section D)		
5 Where any work at height is to be carried out, is safe means of access and egress provided?		
<b>Section B: Work Planning and Risk Management</b>	<b>Yes</b>	<b>No</b>
6 Is there a Fall Prevention Plan (FPP) developed and implemented?		
7 Where hazardous work at height is carried out, is a Work Permit (WP) for hazardous work at height available and implemented?		
8 Has Risk Assessment (RA) been conducted and are Work Safety Procedures (WSP) developed for the works?		
9 Are the hazards and risk control measures communicated to all workers?		
<b>Section C: Processes and Procedures</b>	<b>Yes</b>	<b>No</b>
10 Have all workers received the necessary instructions, information, and training for them to perform work at heights?		
11 Is there adequate supervision to ensure that safe work practices for working at heights are in place?		
<b>Section D: Protection Systems (This section applies to instances where fall arrest or travel restraint systems are employed)</b>	<b>Yes</b>	<b>No</b>
12 Is the condition of the workplace suitable for implementation of a fall arrest or travel restraint system? (i.e. sufficient height clearance for fall arrest, distance from anchorage point or static line to the edge of opening and length of safety harness or restraint belt etc.		
13 Is sufficient and secured anchorage provided?		
14 If "Yes" for the previous question, is the anchorage point or lifeline being used by the workers who are working at height?		
15 Are workers instructed on the proper method to wear and use the safety harness or restraint belt, as well as attach it to the lifeline or anchorage point?		
16 Are the anchorage and anchorage line of the travel restraint system or fall arrest system inspected by a competent person before use by the workers?		
<b>Section E: Ladders and Stepladders</b>	<b>Yes</b>	<b>No</b>
17 Is every ladder and stepladder used of good construction, sound material and adequate strength for the purpose for which it is used?		
18 Where a ladder is used for access or as a working place, are adequate handholds provided to a height of at least one metre above the place of landing of the highest rung to be reached by the feet of any person on the ladder?		
19 Does the ladder or stepladder have level and firm footing?		
20 Is the ladder or stepladder secured so as to prevent undue swaying?		

**Subcontractor Verification:** I, the undersigned, hereby verify that the assigned work location has been examined and the precautions checked on the above Work At Height Precaution Checklist had been made to minimize the chance of falling before the commencement of our work.

Signature:  
Name:  
Appointment: Subcontractor Representative  
Date:

**Work At Height Permit Closure By PM / PE / SS (HE):**

Signature:  
Name:  
Appointment: PM / PE / SS (HE)  
Date: