OPENSHORE DRILLING

# TRENCHING AND EXCAVATION PERMIT

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|---|---|
| Project Name: | Job Number: |
| Applicant: | Company: |
| Application Date: | Excavation Date: |

Permission if requested to excavate to an approximate depth of _____ metres, width of _____ metres, and length of _____metres at the following location:
Location:_____ Sections: _____
DBYD Sequence Number: _____ Expiry Date:
The reason for the excavation is: _____
Supervisor/Crew Leader in charge of Excavation Works: _____

Known Services Located and Identified:

- ☐ Electrical Cables
- ☐ Water Main
- ☐ Sewer
- ☐ Stormwater
- ☐ Optical Fibre
- ☐ Telephone Cables
- ☐ Gas
- ☐ Communications
- ☐ Other

| | |
|---|---|
| Pipe Configuration | |
| Requested Max. / Min. Trench Size | |
| Any variations to the above? | |

## Condtions of Permit

The following will need to be undertaken as a condtion of issuing of this permit

- ☐ Ultrasonic Location of Services
- ☐ Hand location of services
- ☐ Services Marking
- ☐ Services Spotter
- ☐ Isolation
- ☐ SWMS required
- ☐ Dial Before You Dig (ensure all crew members are aware)
- ☐ Visual depth verification
- ☐ Other

## Authorisations and Acceptances

Authorisation to Commence Work:

This permit is valid from ____/____/____ until ____/____/____

Authorisation is given to commence the excavation works under the conditions described above.

Name: Signature:

Acceptance:
I understand and accept the conditions and precautions detailed above and shall ensure that all personnel involved in the excavation works described above are informed of them.

Name: _____ Signature: _____

Spotter Name: _____ Signature: _____ Date: _____

**SUBMIT**