|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **MWPA Use Only** | | | Permit No. |  |
| Associated Permits |  |  | Work Order No. |  |

**Applicant (Permit Owner) to complete Sections 1-6.**

***Note*** – ***If lifting from a vessel – refer to Permit to Work Procedure for detail of management.***

| Section 1. Permit Owner Details | | | | | |
| --- | --- | --- | --- | --- | --- |
| Full Name | |  | Company | |  |
| Email Address | |  | 24hr Contact No. | |  |
| MWPA Responsible Worker | |  | MWPA Responsible Worker Contact No. | |  |
| Start Date / Time |  | | Completion Date / Time |  | |

| Section 2. Reason for Crane Lift / Scope of Work |
| --- |
|  |
|  |

| Section 3. Location of Lifting | | | |
| --- | --- | --- | --- |
|  | Minerals Storage Area |  | Fishing Boat Harbour\*\* |
|  | Berth |  | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

| Section 4. Type of Lifting (Tick **all** applicable types) | | | |
| --- | --- | --- | --- |
|  | **Standard Lift** (details in this form) |  | **Critical Lift** (additional information attached) |
|  | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

| Section 5. Requirement Checklist | | |
| --- | --- | --- |
| The following minimum requirements MUST be met / understood / attached by Permit Owner. | | |
|  | **MWPA Lifting and Rigging Equipment – Selection and Use Guideline** – Permit Owner confirms they have reviewed the Procedure. | |
|  | **Wharf Specification Guideline** –Commercial Harbour and Fishing Boat Harbour – Permit Owner confirms they have reviewed this Guideline, are aware of the potential loading restrictions in place and will liaise with the MWPA Permit Coordinator regarding specific area requirements.  ***Note*** – All loading values are based on a minimum outrigger pad size of 1.2m x 1.2m. | |
|  | **Risk Assessment** –Permit Owner confirms a risk assessment meeting the minimum requirements identified within the MWPA Lifting and Rigging – Selection and Use Guideline must be ATTACHED with this application. The risk assessment supplements the technical information in Lift Plan.  The risk assessment must include Emergency Procedures, or they are to be attached as a separate document.  Copies may be required for adjacent lease holders / operations.  See Optional requirement – Fishing Boat Harbour (FBH) for further detail re risk assessments for lifting within the FBH. | |
|  | **Lift Plan or Lift Study** –Permit Owner confirms they have reviewed the MWPA Lifting and Rigging – Selection and Use Guideline and have identified if the proposed lift is a Standard Lift requiring a Lift Plan (complete Section 6), or a Critical Lift requiring a Lift Study (see optional requirements section). | |
|  | **Worker Qualifications** –Permit Owner confirms that all Workers who conduct work hold suitable qualifications for the work being conducted (for example, High Risk Work Licences) and are ATTACHED with this application. | |
| Yes  No  NA | | **Critical Lift** – Permit Owner confirms a Lift Study meeting the additional minimum details identified in the MWPA Lifting and Rigging – Selection and Use Guideline for lifting of Workers has been ATTACHED with this application. |
| Yes  No  NA | | **Lifting of Workers** – Permit Owner confirms a Lift Study meeting the minimum details identified in the MWPA Lifting and Rigging – Selection and Use Guideline has been ATTACHED with this application. |
| Yes  No  NA | | **Fishing Boat Harbour (FBH)** –Permit Owner confirms that activity occurring in the FBH is under their control as a ‘Worker with management or control of a workplace’ and information provided to the MWPA is to ensure the protection of MWPA assets. |
| Yes  No  NA | | **Works Adjacent to a Berth** –Are the works adjacent to a berth, near bollards or close to vessel mooring lines? If yes, Permit Owner confirms they have reviewed the hazards associated with this activity in the Workers Handbook. |
| Yes  No  NA | | **Traffic Management** – Permit Owner confirms that they have contacted the MWPA responsible Worker and discussed the possibility of the crane lift work disrupting road / traffic flow. An Application for Traffic Management may be required. |
| Yes  No  NA | | **Works Within 5m of a Fuel Pipeline –** If works are scheduled within 5m of a fuel pipeline then additional requirements may apply from the licenced pipeline owner. Permit Owner confirms they have discussed this issue with the MWPA Permit Coordinato**r.** |

| Section 6. Lift Plan | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Description and Dimensions of the Load(s) | | | | | | | |
| Weight of the Load | | *Kg/Tonne* | | Known Weight | | | Estimated Weight |
| Centre of the Gravity | | *Obvious / Estimated* | | | | | |
| Type of Lifting Equipment | |  | | | | | |
| Max WLL as Certified | | *Tonne* | Date Last Certified | | |  | |
| Max Boom / Jib Length | | *Meters* | Fly Jib / Offset | | |  | |
| Max Outrigger Load | | *Tonnes* | Outrigger Pad Size | | |  | |
| Intended Load Radius | | *Meters* | SWL at this Radius | | |  | |
| Lift Percentage | | *Greater than 85%, refer to lift study* | | | | | |
| Sequence of Lift / Special Precautions | |  | | | | | |
| Sketch of Area of Operation  *(Ensure you include the initial location of the load / the final location / path of the load / obstructions or equipment that may obstruct the lifting operation. See Attachment 1 for Berth layout as required).* | |  | | | | | |
| Workers Involved in Lifting Operation | | | | | | | |
| **Position** | **Name** | | | | **Qualification** | | |
| Site Supervisor |  | | | |  | | |
| Crane / Lifting Equipment Operator |  | | | |  | | |
| Rigging |  | | | |  | | |
| Dogging |  | | | |  | | |
| Other |  | | | |  | | |

| Section 7. Permit Owner – Acceptance of Conditions / Requirements | | | |
| --- | --- | --- | --- |
| By signing this document, I understand and accept the Terms and Conditions of this application and declare that all information given is true and accurate.  I understand that prior to the commencement of work, this Application and supporting documentation will be subject to site review and final approval. | | | |
| Permit Owner Name | | | |
| Signature |  | Date |  |

**This form and attached documents should be emailed to** [**permits@midwestports.com.au**](mailto:permits@midwestports.com.au)**.**

| Section 8. MWPA Use – Authorisation | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Permit Coordinator confirms appropriate Authorisations have been completed. | | | | | | | |
| **Permit Received** | | **Position** | **Name** | | | **Signature** | **Date** |
| Yes  No  NA | | BHF Operations Supervisor (BHF Work) |  | | |  |  |
| Yes  No  NA | | Project Manager (Project Work) |  | | |  |  |
| Yes  No  NA | | Engineer |  | | |  |  |
| Yes  No  NA | | Maintenance Supervisor (Port Work) |  | | |  |  |
| Yes  No  NA | | Permit Authoriser – Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
|  | **Authorised** | | |  | **Rejected – Revise and Resubmit** | | |
| Authoriser Name | | | | Signature | | | |
| Role | | | | | | | |
| Comments | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |

| Section 9. MWPA Use – Issue | |
| --- | --- |
|  | The Application has been reviewed by the appropriate Permit Authorisers and found suitable for return to the Permit Owner. |

| Section 10. MWPA Use – Site Review, Approval and Revalidation\* | | | |
| --- | --- | --- | --- |
| I confirm that this Application and supporting documentation has been reviewed. The Permit is now OPEN and Permit Owner has been advised they have control of their activities and work may commence. | | | |
| **Approver Name** | **Approver Position** | **Signature** | **Date / Time** |
|  |  |  |  |

| Section 11. Permit Owner – Acceptance of Conditions / Requirements | |
| --- | --- |
| I confirm that this Permit is now OPEN and as the Permit Owner, I have control of the work activities covered by this Permit. Daily revalidation shall be recorded prior to the commencement of work. | |
| Permit Owner Name | |
| Permit Owner Position | |
| Signature | Date / Time |

| Section 12. Permit Owner – Site Review and Revalidation | | | |
| --- | --- | --- | --- |
| Daily revalidation shall be recorded prior to the commencement of work. | | | |
| **Approver Name** | **Approver Position** | **Signature** | **Date / Time** |
|  |  |  |  |
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| Section 13. MWPA Use – Completion of Work | |
| --- | --- |
| Permit Owner advises work has been completed. I confirm the work area has been left in a clean, safe and acceptable condition and the Permit can be CLOSED. | |
| Approver Name | |
| Approver Position | |
| Signature | Date / Time |

| Section 14. MWPA Use – Permit Closed | |
| --- | --- |
|  | Permit has been CLOSED. |

| Section 15. MWPA Terms and Conditions |
| --- |
| 1. To ensure timely approval for PERMITS, the following MINIMUM approval times apply.    * Application for Land Based Crane Lift, Application to Excavate / Penetrate and Application for Traffic Management shall be lodged at least seven days prior to work.    * All other Permits shall be lodged at least three days prior to works. |
| 1. A copy of this Application for Land Based Crane Lift Permit plus mandatory documentation is to be held on site at all times. |
| 1. Permit Applicant accepts that no work can commence on site until this Permit and associated documentation has been reviewed and approved on site. |
| 1. Permit Owner warrants that it understands the nature of the work permitted by the Permit and risks associated with it, has sufficient competence to carry out the work and accepts responsibility (including work health and safety responsibility) for the work. |
| 1. All Workers accessing MWPA sites, as a minimum are required to have completed the MWPA Induction. Within the Landside and Waterside Restricted Zones, individuals are required to carry their own Maritime Security Identification Card (MSIC) at all times. A visitor’s pass may be obtained, although all visitors must be escorted at all times by a holder of a current MSIC. |
| 1. Any incidents (safety / environmental / damage) must be reported to MWPA immediately.  After hours, please call the 24hr Emergency Contact on 0437 413 734. |

\* Refer to Permit Revalidation Extension form if work period extends past seven days.

\*\* Lifting Activities in the Fishing Boat Harbour

**Custodian – Maintenance Superintendent**

**Approver – Maintenance Services Manager**

**Attachment A – Crane Location on Berth**

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