

	ABP	ASSOCIATED	
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BRITISH PORTS

SERIAL No. **HWV**

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

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From _____ (person in charge of hot work)

Tel No _____ Fax No _____

Date _____ Time _____

Permission is requested to carry out the following **Hot Work** at

_____ (Vessel/Location)
 on _____ (date) from _____ hours to _____ hours

Details of proposed Safe System of Work (eg. tests for flammable vapours, first-aid, fire fighting, 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 Coastguards Agency
Chapter 16 Permit to Work System
Chapter 23 Hot Work
3. The Ship Building and Ship Repairs Regulations 1992
4. *The Management of Health & Safety at Work Regulations 1992*
5. *HSE Information sheet Dock Sheet No. 6 - Hot Work at Docks*

IF WORKING ON VESSEL - HAS MASTER'S WRITTEN PERMISSION BEEN GIVEN?

GAS FREE CERTIFICATE - DO BOTH YOU AND VESSEL'S MASTER HAVE ONE?

Name (Print) _____ Company _____ Signature _____

ABP RESPONSE

Request Granted/Denied

Special Conditions

Name _____ Signature _____ Position _____
_____ Date _____

COMPLETED FORM TO BE FAXED TO HARBOUR/DOCK MASTER

*** Delete as necessary**