

Bridge Equipment Repair Work Permit

Permit No.:

Date:

Vessel/Location:

Equipment:

Work Description:

Work Start Time:

Expected Completion:

Risk Assessment Reference:

Precautionary Measures:

Item Checked	Status	Remarks
Equipment Isolated/Tagged	<input type="text"/>	<input type="text"/>
Work Area Secured	<input type="text"/>	<input type="text"/>
PPE Provided	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>

Authorized By (Name & Signature):

Person Carrying Out Work (Name & Signature):

OOW Informed (Name & Signature):