

# Emergency Services Coordination Consent Form (Telecom Site)

## Site & Coordination Details

Project/Site Name

Site Address

Date

Time

## Consent & Liaison Information

Responsible Person Name

Contact Number

Emergency Services Contacted

Details of Coordination/Notice Given

## Consent Confirmation

☐

I confirm coordination with relevant emergency services for activities at this site.

Additional Comments

## Signatures

Responsible Person Signature

Date

Witness Name & Signature

Date