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| ***Unique Identifier*** |  **Work Description:** |       |
| **Expiry Period:** |
| Start Date      |  **Location:** |       | **Equipment:** |       |
| End Date      | **Requester Name:** |       | **Company:** |       |

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| Reference Documentation (Safe Work Plan) |
| Document | Reference No. | Document | Reference No. |
| [ ]  | Procedure(e.g., Work Instruction, SOP, PRT) |       | [ ]   | Breaking Containment Certificate(for all breaking of containment) |       |
| [ ]  | Job Risk Assessment(for all permits) |       | [ ]   | Gas Test Log(for breaking containment, hot work, or CSE) |       |
| [ ]  | Work Order(for 1SAP Work Management tasks) |       | [ ]  | Hot Work Certificate(for all hot work) |       |
| [ ]  | Isolation Certificate(for when isolations are needed) |       | [ ]  | CSE Certificate(for all CSE work) |       |
| [ ]  | SIMOPs Plan(for when SIMOPs is involved) |       | [ ]  | CSE Risk Assessment(for all CSE work) |       |
| [ ]  | Live Electrical Work Certificate(for electrical work) |       | [ ]  | CSE Rescue Plan(for all CSE work) |       |
| [ ]  | Ground Disturbance Certificate(for brownfields ground disturbance) |       | [ ]  | CSE Entry Log(for all CSE work) |       |
| [ ]  | SDS(where hazardous materials are used) |       | [ ]  | (use for additional reference documents) |       |

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| Permit Authorization |
| I confirm that a Safe Work Plan has been established and attached to safely manage the hazards of the work scope. |
| Permit Authorizer Name (print):      | Signed: | Date / Time:      |

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| Permit Issuance and Acceptance |
| I confirm that I have reviewed the work location and Safe Work Plan with the Permit Holder, and that it is safe for work to commence. |
| Permit Issuer Name (print):      | Signed: | Date / Time:      |
| SIMOPs (countersign for all SIMOPs scenarios)  |
| Ultimate Work Authority Name (print):      | Signed: | Date / Time:      |
| *I confirm understanding of the Safe Work Plan, commit to the controls and will STOP if work needs to extend beyond permit limits.* |
| Permit Holder Name (print):      | Signed: | Date / Time:      |

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| Permit Closure |
| I confirm that all personnel are off the job and the work area has been left in a safe condition (e.g., tools, materials, equipment removed) | Work Complete?Yes       No       |
| Permit Holder Name (print):      | Signed: | Date / Time:      |
| Permit Issuer Name (print):      | Signed: | Date / Time:      |
| Ultimate Work Authority Name (print):      | Signed: | Date / Time:      |

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| **Fill Out Appropriate Area Below (Suspend)** | **Fill Out Appropriate Area Below (Re-issue)** |
| We confirm that the site is secure and in a safe condition. | We confirm that requirements of the Safe Work Plan are in place to allow the work to safely recommence. |

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| 1. Permit Suspension |  | 1. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 2. Permit Suspension |  | 2. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 3. Permit Suspension |  | 3. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 4. Permit Suspension |  | 4. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 5. Permit Suspension |  | 5. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 6. Permit Suspension |  | 6. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 7. Permit Suspension |  | 7. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 8. Permit Suspension |  | 8. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 9. Permit Suspension |  | 9. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| Suspend Re-Issue Continuation |
| **10. Permit Suspension** |  | **10. Permit Re-Issue** |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 11. Permit Suspension |  | 11. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 12. Permit Suspension |  | 12. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| 13. Permit Suspension |  | 13. Permit Re-Issue |
| Holder Print/Sign      | Date / Time:      | UWAInitials | Holder Print/Sign      | Isolation Checked | Date / Time:      | UWAInitials |
| Issuer Print/Sign      | Date / Time:      |       | Issuer Print/Sign      | Initials      | Date / Time:      |       |

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| Work Team Members |
|  | **Sign on job** | **Sign Off job** |
| Print Name | Company | Sign | Date/Time | Sign | Date/Time |
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| **Use continuation sheet for additional signatures**  |

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| Work Team Members (Continuation Sheet)  |
|  | **Sign on job** | **Sign Off job** |
| Print Name | Company | Sign | Date/Time | Sign | Date/Time |
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