Brzeg Dolny, date .....

LOCAL PERMIT TO WORK
For excavation works No. ……..

1. **Work location (detailed location description):**

.....

.....

.....

2. **Scope of work (detailed scope description):**

.....

.....

.....

3. **Work execution period*:**

Work start date/time – …….

Work completion date/time – …….

* period defined by the coordinator

4. **Agreed arrangements:**

4.1. Area user: .....

.....

.....

Employee:

…… ……. …….
Surname and first name date signature

4.2. Opinion of LabMatic LE-1 employee: **YES** **NO**

- ✓ Cable locator check of the work area required* ☐ ☐
- ✓ Continuous supervision by a **LabMatic LE-1** employee required* ☐ ☐
- ✓ Written work order required* ☐ ☐

Other requirements:

.....

.....

.....

LabMatic LE-1 employee:

…… ……. …….
Surname and first name date signature

4.3. Underground utility networks not listed elsewhere: **YES** **NO**

- ✓ Continuous supervision by an external company employee required* ☐ ☐
- ✓ Written work order required* ☐ ☐

Other requirements:

……

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.....

Employee:

…… ……. ……
Surname and first name date signature

4.4. Gas network: **YES** **NO**

- ✓ Continuous supervision by an ETIWS employee required* ☐ ☐
- ✓ Written work order required* ☐ ☐

Other requirements:

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ETIWS employee:

…… ……. ……
Surname and first name date signature

4.5. Heating network: **YES** **NO**

- ✓ Continuous supervision by an ETIWS employee required* ☐ ☐
- ✓ Written work order required* ☐ ☐

Other requirements:

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.....

ETIWS employee:

…… ……. ……
Surname and first name date signature

4.6. Water supply network: **YES** **NO**

- ✓ Continuous supervision by a COŚ employee required* ☐ ☐
- ✓ Written work order required* ☐ ☐

Other requirements:

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.....

COŚ employee:

…… ……. ……
Surname and first name date signature

4.7. Sewerage network: **YES** **NO**

✓ Continuous supervision by a COŚ employee required* ☐ ☐

Other requirements:

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.....

COŚ employee:

…… ……. …….
Surname and first name date signature

4.8. PCC IT network: **YES** **NO**

✓ Continuous supervision by a PCC IT employee required* ☐ ☐

Other requirements:

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.....

.....

PCC IT employee:

…… ……. …….
Surname and first name date signature

4.9. GKK Railway Department: **YES** **NO**

✓ Continuous supervision by a GKK employee required* ☐ ☐

Other requirements:

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.....

.....

GKK employee:

…… ……. …….
Surname and first name date signature

5. Opinion of the Occupational Health and Safety Office employee (GB) (tel. +48 667 650 769) or another person authorised by PCC (external H&S Inspector / H&S Specialist, tel. 885-965-354)

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.....

.....

GB employee / authorised person:

…… ……. …….
Surname and first name date signature

5.1. Comments of the person referred to in item 5 regarding excavation works on the given day* (date – comment):

……

……

……

……

……

……

……

* if applicable

6. I authorise the commencement of excavation works: **)

Work date	Area user		Work coordinator	
	First name and surname	signature	First name and surname	signature

7. I acknowledge the arrangements of the "Local Permit for Excavation Works". I undertake to apply and comply with them:)**

Work date	Person in charge of works (contractor)		Construction equipment operator	
	First name and surname	signature	First name and surname	signature

8. Register of additional supervisors**)

Work date	First name and surname	Supervision start time	Supervision end time	Additional supervisor signature

9. Attachments

	TAK	NIE
Site Overview Map Required*)		

List attachments in sequence:

……

……..

……..

NOTE:

The Work Coordinator is required to notify the area owner (user) of the area where excavation works are being carried out, either by telephone or in person, about the commencement and completion of excavation works on a given day, providing the following information:

a) work location
b) scope of work
c) name of the contractor
d) number of contractor personnel

e) duration of works (including start and finish times).

*) – zaznaczyć wymagane przez postawienie znaku „x” w odpowiedniej kratce.
**) – liczbę wierszy w tabeli można zwiększać lub zmniejszać w zależności od potrzeb.