

Personnel Register No. 1

FROM: : hours / / 20 TO: : hours / / 20

PERMIT HOLDER NAME	SIGN ON	TIME ON	SIGN OFF	TIME OFF
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RELIEVING PERMIT HOLDER NAME	SIGN ON	TIME ON	SIGN OFF	TIME OFF
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Members of the working party acknowledgement (See Instructions Part B on the reverse side of the pink Permit)

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I certify that **ALL** persons and material are clear of the electrical equipment to be re-energised, and EITHER

I also certify that all persons who have previously signed "ON", have signed "OFF" this Personnel Register, and that all have been instructed to treat the equipment as LIVE.

OR

1. I also certify that amongst those persons (as indicated above) who have failed to sign "OFF", I have made reasonable attempts to contact and check that any person failing to sign off has left the work site and it is impracticable to get them back for signing off, **AND**
 2. I accept responsibility for all those persons who have failed to sign "OFF", and I have undertaken a joint site inspection with the person retrieving the Permit to ensure that all persons, tools, plant and materials are outside the required minimum Safe Approach Distance from exposed electrical equipment for their safe energisation.

PERMIT HOLDER NAME	SIGN OFF	TIME OFF
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Personnel Register No. 2

FROM: hours TO: hours

PERMIT HOLDER NAME	SIGN ON	TIME ON	SIGN OFF	TIME OFF
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PERMIT HOLDER NAME	SIGN OFF	TIME OFF
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Personnel Register No. 3

FROM: hours TO: hours

PERMIT HOLDER NAME	SIGN ON	TIME ON	SIGN OFF	TIME OFF
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Personnel Register No. 4

FROM: hours TO: hours

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RELIEVING PERMIT HOLDER NAME	SIGN ON	TIME ON	SIGN OFF	TIME OFF
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Personnel Register No. 5

FROM: hours TO: hours

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Personnel Register No. 6

FROM: hours TO: hours

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