

## RISI Waiver application

Sponsors details	
Name	
Position	
Division	
Contact Details	

Applicant/s details*					
* Waiver applications for more than one person can be made on this form provided all other details are identical					
1	Name		4	Name	
	DOB			DOB	
	Company			Company	
2	Name		5	Name	
	DOB			DOB	
	Company			Company	
3	Name		6	Name	
	DOB			DOB	
	Company			Company	

Details of activity	
Date of work/activity	From <input type="text"/> To <input type="text"/>
Description of work/activity	<input type="text"/>
Location of work/activity	<input type="text"/>

Protection Arrangements	Yes	No
All activities associated with this application have been assessed by a Protection Officer or a person with relevant worksite protection competencies and the necessary	<input type="checkbox"/>	<input type="checkbox"/>
The applicant/s will be supervised at all times by a Protection Officer or person with relevant worksite protection competencies whilst in the Rail Corridor	<input type="checkbox"/>	<input type="checkbox"/>
The applicant/s will receive an induction and any applicable pre-work briefing prior to entering the Rail Corridor	<input type="checkbox"/>	<input type="checkbox"/>
The applicant/s will wear approved high-visibility clothing and any other applicable PPE	<input type="checkbox"/>	<input type="checkbox"/>