

PREMIER MARINAS - PERMIT TO ACCESS



This permit must be completed when you first register to undertake any commercial work within a Premier marina. On completion you will be issued with a counter-signed copy, this **MUST** be produced on each occasion when signing in at a Premier marina.

PREMIER
MARINAS

This is valid when signed until the 'permit expiry date' detailed overleaf. Once you have signed in on arrival you may carry out tasks as set out in your submitted risk assessments and method statements. Any other types of hazardous work will require a separate risk assessment and a relevant 'Permit to Work', e.g. hot works, working at height, confined spaces, diving etc.

You are reminded that you have obligations in accordance with the Health and Safety at Work Act 74. You are also reminded that Section 3 of the Management of Health and Safety Regulations 99 supports the Health and Safety at Work Act by requiring employers to implement a number of general measures for the management of health and safety - particularly a suitable and sufficient risk assessment.

Premier Marinas Ltd has not granted approval for any risk assessments or safe systems of work submitted but is 'reasonably satisfied' that associated hazards and risks have been considered by the contractor prior to any works commencing.

CONTRACTOR DETAILS

Company name 'The company':		Company registration number:	
---------------------------------------	--	-------------------------------------	--

Primary contact name:		On site contact number:	
------------------------------	--	--------------------------------	--

Types of work being carried out:

Equipment being used:

PERMIT CONDITIONS

By signing this permit I agree that I am authorised to sign on behalf of 'The company', and that I and representatives of 'The company':

- have completed and provided a risk assessment, method statement/safe system of work, for the work to be undertaken.
- are suitably trained/qualified to carry out the works.
- will use the tools/equipment that is in good repair, tested and fit for purpose.
- will notify 3rd parties of the works where required, and that Premier be informed of that notice given.
- have received a copy of Premier's 'Contractors Combined Health & Safety Document', and been given an induction for the marina being worked at.
- have provided Premier with a valid copy of Public Liability Insurance Certificate (minimum £5m cover).

I accept the conditions of this permit. I have provided what I consider to be appropriate risk assessments and method statements and I am aware of all precautions that need to be taken and will abide by them accordingly.

Print Name:

Date:

Signature:

Please note that if any of the following services will be affected, Premier must be notified in advance of work proceeding, stating precautions taken:

Electrical/Mechanical
Signage
Gases

HVAC
Restricted Areas
Compressed Air

Fire Systems
Barriers
Other

Drainage
Excavation

Water
Mechanical Lifting

TO BE SIGNED BY THE CONTRACTOR AND COUNTER-SIGNED BY THE MARINA

Authorised marina representative: I am reasonably satisfied that the associated risks have been considered and the contractor has a safe system of work in place.

Contractor: I confirm that I have received a site safety induction for the appropriate Marina as detailed below.

Brighton:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Chichester:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Eastbourne:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Endeavour Quay:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Falmouth:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Gosport:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Noss on Dart:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Port Solent:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Southsea:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>
Swanwick:	<input type="text"/>	Contractor:	<input type="text"/>	Date:	<input type="text"/>

ADDITIONAL INFORMATION

Please include additional notes or information here

PREMIER TO COMPLETE

PERMIT EXPIRY DATE:

INSURANCE EXPIRY DATE:

FEE: Paid Not applicable