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| MUN Logo CMYK |

**Excavation Work Permit Application**

This permit application applies for all excavation, slab on grade cutting and ground penetration works, to a depth greater than 300 mm.

A copy of this permit application must be maintained by the contractor and available upon request. The University Representative and the General Contractor, in consultation with asset owners, complete this Permit Application to Excavate form.

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| **PART A – PERMIT APPLICATION SUMMARY** | **Permit No:**  |
| **Location:** |  | **Grid Reference:** |  |
| **Date To Issue:** |  | **Date To Expire:** |  |
| **Work Order #:** |  | **Project #:** |  |

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| **PART B – PROPOSED WORK DETAILS** |
| **Type of Works (Check one)** | **🞏 Project** | **🞏 Maintenance** | **🞏 Emergency** |
| **Description of Work** |  |
| **Details of Excavation/Intrusive Work (Length/Width/Depth)** | **L** |  | **Post/Bore Holes:** | **🞏 Yes**  | **Quantity:** |  |
| **W** |  |  |  |
| **D** |  | **Other:** |  |
| **Requestor: (Contractor/Shop)** |  |
| **Contact Email:** |  |
| **Sub Contractor:** | **🞏 N/A**  |
| **Contact Email:** |  |

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| **PART C – EXISTING ASSET INVESTIGATION** |
| Asset investigations must be conducted before any cutting, excavation and/or ground penetration works to identify existing concealed assets and services, potential risks and site control measures required for the work. |
| 1. **Infrastructure Location Checklist** (This information must be obtained from the Utility Owner or Facilities Management)
 |
| **Asset**  | **Drawings and Maps received**  | **MUN Assets in work area** | **3rd Party Assets in work area** | **Assets marked on site** |
|
| **Electrical Distribution** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
| **Street Lighting**  | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
| **Water**  | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
| **Sewer/Storm Drainage** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
| **Tunnels**  | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
| **Communications**  | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
| **Other (Examples)****Trees, Fuel lines, Tanks, etc** |  | **🞏 Yes** | **🞏 Yes** | **🞏 Yes** |
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| **Notes:** |  |
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| **SKETCH OF PROPOSED WORK LOCATION**(NOT TO SCALE) |
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| **PART D – UNIVERSITY AUTHORIZATION** |
| 1. **Memorial University Systems Owner Review**
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| The information contained above on this permit application has been reviewed and assessed by the following persons with regards to the area of responsibility indicated. Signature indicates approval to proceed with work under the conditions provided. |
| **Area of Responsibility** | **N/A** | **Name** | **Title** | **Signature** | **Date** |
| FM Grounds | 🞏 |  |  |  |  |
| FM Electrical  | 🞏 |  |  |  |  |
| FM Central Utilities (NE Zone) | 🞏 |  |  |  |  |
| Environmental Health & Safety | 🞏 |  |  |  |  |
| Other: | 🞏 |  |  |  |  |
|  |
| 1. **University Representative (FED Project Coordinator, Project Manager or FM-O&M Supervisors/Manager)**
 |
| The University Representative has provided the contractor with all available information relating to the concealed and underground conditions at the location of the work. All stakeholder information has been submitted and is summarized and/or attached to the permit for inclusion by the contractor into their work plan.  |
| **Name** |  | **Title** |  | **Signature** |  |

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| **PART E – CONTRACTOR ACKNOWLEDGEMENT** |
| The information contained in this document is intended as a guide for underground excavation and intrusive work only and is not intended to identify all hazards and controls. This information must be incorporated into a hazard assessment for the full scope of work. The Trade, or General Contractor and their Sub Contractors performing the work are responsible to ensure all hazards are identified adequately eliminated or controlled to protect the health and safety of all persons and any assets affected by the works. |
| The proposed work area(s) have been assessed for the presence of concealed assets. Assets have been indicated oridentified as suspected and marked accordingly. Control conditions must be included in the field level hazard assessment.Persons working under this permit application must be instructed about control measures to be implemented and have supervision is in place to ensure the control measures identified in this permit application will be complied with. |
|  | **Name** |  | **Signature** | **Date** |
| General Contractor |  | Supervisor |  |  |
| Sub-Contractor(insert N/A if not applicable) |  | Supervisor |  |  |

**Permitting Completion Procedure:**

1. General Contractor identifies location(s) intrusive work that requires services to be identified and located.
* Complete Part A and, B with Memorial Staff or Contractor.
1. University Representative circulates the permit application to the System Owners outlined in Section D for verification.
* Each section shall verify, by their respective SOP, the presence/absence of assets in the area.
* Complete Part C.
1. Upon sign off by each System Owner, communicate all hazards to the Memorial Staff OR Contractor executing the work.
* This should be in the form of a revised/redlined drawing, sketch or markings made on site.
* Complete Part D1.
1. The University Representative shall have the permit application signed by the General Contractor, if applicable.
* Complete Part D2 and Part E.
1. Memorial Staff complete a detailed hazard assessment OR contractor completes a detailed hazard assessment that incorporates the hazards.
2. Forward copies of completed permit application to EHS for approval and issuance of a permit and permit number.
3. Signed permits are provided to the Contractor.
4. Copies of permit application and permit are logged as attachments to WO in TMA or the project file.
5. Scan data should be logged by the respective Trade for future reference and copied to FED for Basemap updates.
6. Where a contractor discovers unidentified underground services, not logged during site scan, university representative is to be notified before excavation continues.

**Process WorkFlow**

Send Permit to Contractor and Subcontractor (where applicable) for signature

