



PERMIT TO WORK

07 - PTW – Electrical- v1.0

08 – Working in Elevator Shaft

Requirements		Response
Location onboard		
Description of works to be done		
Authorised officer in charge		
Period of validity of permit to work (should not exceed 24 hours)		___ / ___ / ___ from ___ : ___ to ___ : ___
#	Checklist	✓
01	Has the job discussed and planned with the Chief Engineer?	
02	Has specific risk assessment issue, if required (non-routine maintenance)?	
03	Have the relevant department been advised of isolation?	
04	Have all the landing doors tagged out of service?	
05	Has main and auxiliary supply switched off and tagged, if required?	
06	Has cabin landed to first floor, if required?	
07	Personal protective equipment (PPE) provided?	
08	Safety harness provided, if need to work at high?	
09	Additional specific precautions identified during the on-site toolbox meeting applied?	
10	Has deck landing area isolated with barrier if risk of accidental fall it is present?	
11	Have communication between engineer in the trunk and the engineer in the lift machinery space established?	
#	Work on powered lift	
12	Has the cabin landed at main deck?	
13	Has point 1,2,3,4,7,8,9,10 and 11 done?	
14	Has the cabin top no more than 50 cm from landing (entering from upper deck door)	
15	Has the emergency stop button in the control panel switched on, before entering the cabin top?	
15	Have the safety poles extended when landing door has been opened manually with the special key?	
16	Has the alarm for the safety pole sounding?	
17	Has the door opened manually tested safety closed and locking cam engaged, after entering the cabin top?	
18	Has the manual switch on the cabin's top switched to local operation?	
19	Has the emergency button released and local operation control tested?	
20	Has the emergency stop button in the local control tested and working properly?	
21	Has additional portable light available and tested?	
22	Has the cabin lift free to move in local operation?	





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23	Has the engineer on the cabin top safely away from any potential contact during the cabin movement?	
24	Has precaution taken to avoid be in close proximity to moving/rotating part?	
25	Have the safety switch on the top or bottom of the trunk stopped the cabin movement if reached?	
26	Has the above switch's by-pass authorized to be switched on by Chief Engineer?	
27	Has the emergency stop button activated any time you need to stop for working?	
	After completion of work	
28	Has the main and auxiliary power switched on (when worked on dead power)?	
29	Has the emergency stop button in the main control panel switched on?	
30	Has the local control switched in normal operation and secured in rest position?	
31	Has the landing door used to exit the trunk checked for the locking cam engaged and door closed?	
32	Has the emergency button released?	
33	Has the safety poles reset?	
34	Has the safety stop of the cabin tested when a landing door has been opened with the key?	
35	Has the lift safe to put back in operation?	
36	Has all tagged removed and logged?	
37	Has all the department informed the lift is back in operation?	
	Working on hydraulic system	
38	Have some of the previous point satisfied and ticked when required?	
39	Has the main hydraulic isolating valve closed?	
40	Has the air eventually accumulated in the hydraulic circuit properly vent before put the elevator back in service	
41	Have the main isolating valve open at the work completion ?	

Confirmation of checks: I am satisfied that required precautions have been taken and that safety arrangements will be maintained for the duration of the work.

Signed

Authorising Officer

Date and time: ___/___/____ @ ___ : ___

Signed

Authorised persons

Date and time: ___/___/____ @ ___ : ___

Signed

Authorising Officer

Date and time: ___/___/____ @ ___ : ___

Cancellation of certification: The work has been completed / cancelled and all persons under my supervision, materials and equipment have been withdrawn.

