

# NIGHT SHIFT – WORK PERMIT



Permit No.: \_\_\_\_\_

Date: \_\_\_\_\_

This application must be completed and submitted by the Main Contractor/Consultant for all projects having a proposal for night shift. Application must be made after meeting DS -QHSSE requirements. Night shift work permit will cover from 18:00 hrs to 06:00 hrs.

A. PROJECT DETAILS		
Project Name	Plot No.:	
Contractor	Consultant:	
Client		
No. of employees.		
Night Shift Responsible Person (Safety)	Name:	Contact No:
Night Shift Duration	From (Date):	Valid till:

B. LIST ACTIVITIES TO BE CARRIED OUT			
1. _____	2. _____	3. _____	4. _____
5. _____	6. _____	7. _____	8. _____

C. CONTRACTOR'S COMPLIANCE STATEMENT				
We hereby confirm that the following HSEQ requirements shall be complied with:				
No.	Statement Description	Yes	No	NA
1	Organization chart available for night activities. Responsible engineer need to be available on site with the authority of decision making.*			
2	DS approved night shift risk assessment is available at site. *			
3	Method statements are available for night shift activities. *			
4	Emergency procedures are established and implemented for night shift activities. *			
5	Full time safety advisor is available with valid SARS card / NEBOSH / IOSH certifications.			
6	All the stair cases & work areas are fitted with adequate light's with back-up power. **			
7	Full time first aider & fire fighters are available for night shift activities.			
8	Site security and transport arrangement is available for night.			
9	Adequate site supervisors are nominated for the night shift with communication facilities.			
10	Safety induction program for night shift and evidence of its communication to workforce is available on site.			
11	Welfare facilities are available as per the DS/DM requirements.			
12	Lifting plan prepared and available at site.			
13	Night shift toolbox meeting program is available at site. *			
14	No objection letter from the client is available at site for the night shift activities. *			

We undertake to carry out the night shift activities in accordance with DS/DM and other relevant International construction safety standards. We are aware that we are liable for financial penalties/warning letters for failing to carry out our works in accordance to relevant regulations & standards. We are also aware that in the event of DS issuing violation / stop work notices we are bound to stop the work immediately in accordance with DS Regulations & Standards.

\_\_\_\_\_  
**Main Contractor**  
 Name & Signature of Project manager & company stamp

\_\_\_\_\_  
**Consultant / Client**  
 Name & Signature of Authorized person & company stamp

**\* Provide document proof as attachment to this application.      \*\* Provide lighting layout plan with LUX levels at work areas.**

D. DS QHSSE APPROVAL		
<input type="checkbox"/> Approved	Name :	Signature :
<input type="checkbox"/> Not Approved	Date :	Contact No. :
<ul style="list-style-type: none"> <li>Any changes in the scope of work or the circumstances detailed and assumed in this permit automatically revoke the permit.</li> <li>This permit does not authorize "HOT WORK" for which a separate permit is required.</li> </ul>		