 <b>HEALTH AND SAFETY</b> <b>TRAINING AND ENVIRONMENTAL SERVICES</b> <small>www.htetrust.co.za</small>	<b>ANNEXURE 1</b>  Application for a work permit to do construction work	<b>Date:</b>	2019/07
		<b>Document Number:</b>	S1 APCW
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		<b>Contractor:</b>	
<b>Site:</b>			

**ANNEXURE 1**

APPLICATION FOR A PERMIT TO DO CONSTRUCTION WORK  
 [In terms of Regulation 3(2) of Construction Regulations 2014]

This application must be submitted with the following documents:

- 1) Health and Safety specification.
- 2) Health and Safety plan.
- 3) Baseline risk assessment.

1. Name, postal address and telephone numbers of the client:

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2. Details of the HTE Agent.

- a) Title, Surname and Initials: \_\_\_\_\_
- b) Identity number / Passport Number: \_\_\_\_\_
- c) Registration number with SACPCMP: \_\_\_\_\_
- d) Office Tel. number and/or Mobile Number : 082 4520 4420
- e) Postal address: 10 Baobab Ave Roodekrans Roodepoort 1724

3. Name, Postal address and telephone numbers of the appointed principle contractor:

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4. Name, Postal address and telephone numbers of the designer of the project:

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5. Name, Postal address and telephone numbers of the following persons:

- a) Construction Manager:
   
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\_\_\_\_\_
   
\_\_\_\_\_
- b) Construction Health and safety manager:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
- c) Construction Health and Safety Officer:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_

6. Exact physical address of the construction site office:

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	<b>Site:</b>		<b>Contractor:</b>

**FOR OFFICE ONLY**

<b>Authorization</b>  <b>/Unique No.</b>	<b>LABOUR CENTRE</b>	<b>OFFICIAL APPROVAL</b>  <b>STAMP</b>
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15. Date of application: \_\_\_\_\_

16. Submitted documents prescribed in Construction Regulation 5(4) (Please Tick ):

CR 5(1)(a)		CR 5(1)(b)		CR 5(1); (C-S)	
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17. Result of the application (Please Tick ):

<b>Approved</b>	<b>Declined</b>
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18. Reason for declining the application:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

19. \_\_\_\_\_  
Signature of the Supervisor

20. \_\_\_\_\_  
Signature of revoking Officer/ Inspector