

SAFETY INSTRUCTIONS FOR CONTRACTORS & OTHER VISITORS

CAMPUS:		
BUILDING:		
CAMPUS OR BUILDING MANAGER DETAILS:	NAME:	CONTACT NUMBER:

Welcome to Imperial College London. Your safety is important to us. To ensure this we have given you this information sheet – YOU MUST COMPLY WITH THESE INSTRUCTIONS AT ALL TIMES.

YOU MUST

- REPORT TO THE BUILDING RECEPTION AND FOLLOW ANY INSTRUCTIONS GIVEN.
- TAKE NOTICE OF SIGNS (SEE OVERLEAF).
- IF YOU ARE INVOLVED IN AN ACCIDENT CONTACT THE BUILDING MANAGER, SECURITY OR ANY MEMBER OF STAFF IN THE DEPARTMENT THAT YOU ARE VISITING AS SOON AS POSSIBLE. FIRST AIDERS ARE IDENTIFIED ON THE RELEVANT SIGNAGE THROUGHOUT THE BUILDING.
- RING **020 7589 1000** FOR HELP (COLLEGE SECURITY)
- YOU MUST COMPLY WITH THE COLLEGE SMOKING POLICY WHILST ON THE PREMISES.
- IF YOU ARE A CONTRACTOR;
 - You will be referred to the building or maintenance manager or a lab manager on arrival at the reception desk.
 - And your work involves work in a hazardous area, such as a laboratory, roof or plant room, then a Permit-to-Work form must be completed before the work is carried out. This will be filled in by the person responsible for the area but must be read, understood and signed-off by the contractor. See overleaf for an example. The person responsible may request a written method statement before issuing the permit. The areas covered by the permit will be specified on the form.











IF YOU DISCOVER A FIRE DO NOT PUT YOURSELF AT RISK. SOUND THE ALARM AND LEAVE THE BUILDING. IF YOU HEAR THE FIRE ALARM RINGING LEAVE THE BUILDING IMMEDIATELY BY FOLLOWING THE 'FIRE EXIT' SIGNS AND GO TO THE FIRE ASSEMBLY POINT.

LOCATION OF FIRE ASSEMBLY POINT:

YOU MUST NOT

- ADMISSION TO A BUILDING DOES NOT MEAN FREEDOM TO ROAM – YOU MUST PROCEED DIRECTLY TO THE AREA THAT YOU HAVE BEEN AUTHORISED TO VISIT / WORK.
- YOU SHALL NOT ENTER ANY ROOM IDENTIFIED BY ANY OF THE YELLOW HAZARD WARNING SIGNS (SEE BELOW) WITHOUT EXPLICIT AUTHORISATION FROM THE PERSON(S) RESPONSIBLE FOR THAT AREA.
- DO NOT TOUCH ANY ITEMS OR ENTER AREAS WITHIN LABORATORIES WITHOUT AUTHORISATION. NEVER TOUCH ANY ITEMS MARKED WITH THE YELLOW HAZARD SIGNS.



HAZARD WARNING SIGNS			
			
BIOHAZARD	RADIATION	LASER	CHEMICAL - TOXIC
			
CORROSIVE	FLAMMABLE	HARMFUL	OXIDISING

Imperial College London

PERMIT TO WORK
LABORATORIES AND ASSOCIATED AREAS
Permit Number: XXXXXXXXXX

1. PERMIT ISSUE DETAILS – to be completed by the Lab Manager (or other authorised person)

Title of work/nature of job: *Annual window cleaning*
Description of work: *Building-wide cleaning of inside of windows, including those in laboratory areas.*

Location of Work Area: Building: *XXXXXXXXXX* Campus: *XXXXXXXXXX*
Department/ Division: *XXXXXXXXXX* Room: *210-220*

Timescale of Work: Date of required access: *Monday 20 Jan 2005*
Time of required access: *9AM* Completion Time: *10AM*

Services affected:
None Electrical Piped gas Steam Water Other (specify):

Hazards:	Description:	Precautions:
Biological <input checked="" type="checkbox"/>	<i>Containment Level 2 laboratory.</i>	<i>1. Cease work in lab for 30 min while job is being carried out 2. Store hazardous materials and waste in safe location 3. Clear and decontaminate benchtops by windows 4. Temporarily relocate any equipment obstructing windows</i>
Chemical <input checked="" type="checkbox"/>	<i>Standard laboratory hazardous chemicals – flammables, corrosives, etc</i>	<i>As above</i>
Radiation <input type="checkbox"/>		
LASER <input type="checkbox"/>		
Compressed gases/ cryogenics <input checked="" type="checkbox"/>	<i>2 x CO2 cylinders and 1 x 60 L liquid Nitrogen dewar in lab</i>	<i>No specific precautions – cylinders and dewar located well away from windows</i>
Other <input type="checkbox"/>		

2. PERMIT ISSUE – this declaration must be signed by the Lab Manager (or other authorised person)

I confirm that the above work can be carried out and that I have informed all local staff whose work may be affected that their work shall be suspended.

Lab Manager's (or other authorised person's) name: *John Smith* Signature: *J. Smith*
Date: *19/01/2005* Time: *17:00*

3. PERMIT RECEIPT – this declaration must be signed by the operative or contractor

I have read and understood the precautions required and the restrictions placed on the time and place of work. I am satisfied that the work areas have been sufficiently cleared to allow the work to be carried out safely. I also understand that this permit deals with the control of laboratory hazards alone and other permits may be required for, for example, pipework isolations or hot works.

Name of operative or engineer: *Jim Jones* College Staff Dept/ Div:
Company Name: *Acme*
Signature: *J. Jones* Date: *20/01/2005* Time: *09:00*

4. WORK COMPLETION – this must be completed by the person named in Section 3

The work described above has been completed and all personnel, materials and equipment have been withdrawn.

Signature: *J. Jones* Date: *20/01/2005* Time: *09:30*

5. WORK ACCEPTANCE AND PERMIT CANCELLATION – to be completed by person named in Section 2

I accept that the work has been completed and that the laboratory areas affected can now be made operational. This Permit is now cancelled.

Signature: *J. Smith* Date: *20/01/2005* Time: *09:30*

Distribution: Top copy: Operative/ Contractor Middle copy: Lab Manager Pad copy: Building Manager

EXAMPLE OF A COMPLETED PERMIT-TO-WORK FORM

SECTIONS 1 AND 2 SHOULD BE COMPLETED AND SIGNED BY THE PERSON RESPONSIBLE FOR THE AREA

SECTION 3 SHOULD BE COMPLETED AND SIGNED BY THE CONTRACTOR HAVING UNDERSTOOD ANY PRECAUTIONS THAT MUST BE TAKEN.

SECTIONS 4 AND 5 SHOULD BE SIGNED BY BOTH PARTIES ON COMPLETION OF THE WORK