## Indiation Contificate

Application / description of isolation:    Date	4		>		'	solation	Certii	icate				
Size:   Work area:   Equipment requiring isolation:					Ар	plication/ de	scriptio	n of isola	tion			
Reason for isolation:  Type of isolation (tick all that apply)  Pto sign here if EPt: Date: Description   Extended Period Isolation   Pto sign here if EPt: Date:				Date:	Permit issuer r	iame:			Complier n	ame:		
Reason for isolation:  Type of isolation (tick all that apply)  Pto sign here if EPt: Date: Description   Extended Period Isolation   Pto sign here if EPt: Date:												
Type of isolation (tick all that apply)    Process isolation   Electrical isolation   Pto sign here if EPk   Date:	_	Site	e:		Work area:		Equip	ment requir	ing isolation:			
Process Isolation   Extended Period Isolation   Pit to sign here if EPI:   Date:		Rea	ason for isolati	ion:								
Process Isolation   Extended Period Isolation   Pit to sign here if EPI:   Date:												
Process Isolation   Extended Period Isolation   Pit to sign here if EPI:   Date:												
Electrical Isolation   Isolation of safety/ emergency systems or CSDS			l		Ту	pe of isolatio	n (tick a	III that ap	ply)			
Completed seperately and attached   Lock Box required   Lock box number:   Iteolation Certificate lock:	7										Date:	
Completed seperately and attached   Lock Box required   Lock box number:   Isolation Certificate lock:			Electrical Iso	lation								
Completed on reverse page						Ι.			ired)	loolation C	ortificat	to look
Solation of safety systems (tick applicable systems)   ESD	က				ached Lock Bo	ox required L	OCK DOX III	imber:		Isolation C	erunca	te lock:
ESD   Emergency alarm			Completed o	n reverse page		_						
Fire & Gas detection   Fire response							ms (tick	c applicat	le systems	<b>s</b> )		
Emergency escape   Site Menager:   Sign:   Date:   Time:			ESD		Emergency alarm	1						
Site Manager:    Sign:   Date:   Time:	4		Fire & Gas de	etection	Fire response							
Approval to install isolations as per LOTO Plan and test Record Permit issuer    Initial			Emergency e	scape	Other (specify)							
Initial		Site	e Manager:		Sign:			Date:			Time:	
Initial					Approval to inst	all isolations	as per L	OTO Plar	and test F	Record		
PRID or Electrical drawings checked to plan/verify isolation points  Physical site review completed to verify required isolations  Certified Electrician available to carry out electrical Isolations  Methodology to test/confirm that equipment is isolated, de-energised or depressurised and/or cannot be started  LOTO Plan and Test Record completed & checked  Communication to affected Personnel  Permit issuer  Registered Permits  Permit Holder  Permit Holder  Permit Type  Permit Holder  Permit Holder  Permit Holder   Permit Holder   Permit Holder Lock # (if lock box in use)  Approval to remove Isolations  Permit issuer  Approval to remove Isolations  Permit issuer name  Sign  Date:    Sign   Date:			l			Per	mit issuer					
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Methodology to test/confirm that equipment is isolated, de-energised or depressurised and/or cannot be started  LOTO Plan and Test Record completed & checked  Communication to affected Personnel  Permit issuer    Permit issuer   Sign												
LOTO Plan and Test Record completed & checked    Communication to affected Personnel	ហ			Certified Electri	cian available to carr	y out electrical I	solations					
Communication to affected Personnel							ted, de-en	ergised or d	epressurised a	and/or cannot	be star	ted
Permit issuer    Naster   Sign					· · · · · · · · · · · · · · · · · · ·							
Registered Permits Permit Holder Permit Holder Date Permit Type Permit number Permit Holder Permit Holder Permit Holder Permit Holder (if lock box in use)  Approval to remove Isolations Permit issuer All permits associated with this Isolation Ceritificate have been cancelled and it is safe to remove the isolations specified on this certificate Permit issuer name  Sign Date:  Isolation Certificate Close out Permit issuer All isolations have been removed and LOTO Plan And Test Record has been checked for completeness. Work area checked and walk the line completed		Per	rmit issuer				Sign					
Registered Permits Permit Holder Permit Holder Date Permit Type Permit number Permit Holder Permit Holder Permit Holder Permit Holder (if lock box in use)  Approval to remove Isolations Permit issuer All permits associated with this Isolation Ceritificate have been cancelled and it is safe to remove the isolations specified on this certificate Permit issuer name  Sign Date:  Isolation Certificate Close out Permit issuer All isolations have been removed and LOTO Plan And Test Record has been checked for completeness. Work area checked and walk the line completed												
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Completed			All isolations h	nave been remov	ed and LOTO Plan A	nd Test Record	has been d		completeness	s. Work area c	hecked	and walk the line
Permit issuer name   Sign   Date:	w	Per	rmit issuer nan	ne		Sign	mpleted			Date:		

## **LOTO Plan and Test Record**

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Descr	Description of Work:		Compiled by:		<u>w</u>	Sign:			Date:		LOTO Cert #	44	
			Checked by:		S	Sign:			Date:		IC lock #		
			Location/Site:	ä							Lock Box #		
A cop Mark	A copy of marked up drawings shall be attached showing how the system has been made safe, and how the plan was developed Marked up drawing number/s:	has been m	ıade safe, an	d how the p	lan was deve	pedol							
	EQUIPMENT DESCRIPTION			Ą	oplication	Application of Isolation	Ę			Remo	Removal of Isolation	ation	
Step	EQUIPMENT DESCRIPTION	Asset #	Changed State	IC Lock No.	PH Lock No.	Applied By	Date/ Time	Verified by <sup>1</sup>	Released by <sup>2</sup>	Removed by	Date/ Time	Verified by	Found/ Left State
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NOTES

1 Application of isolation is performed by a Z Permit Issuer (PI) or nominated competent person, and is independently checked by a competent 'checker'. Where the PH is the best person to perform the isolation, i.e. an Electrician, the PI must observe the application personally, i.e. CANNOT delegate this responsibility.

2 A lock box is required for isolations that have more than 5 individual isolation points

3 LOTO Plan and test records with more than 10 Isolation points must be completed seperately and attached to the IC

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