Work Permit Extension Application

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICANT DETAILS** | | | | |  | | |  | | |
| **Name of organisation:** | | | | Click or tap here to enter text. | | | **ABN:** | Click or tap here to enter text. | | |
| **Postal Address:** | | Click or tap here to enter text. | | | | | | | | |
| **Name of Contact:** | | | Click or tap here to enter text. | | | | | | |
| **Email:** | Click or tap here to enter text. | | | | | **Mobile:** | | | Click or tap here to enter text. | |
| **Role of Contact:** | | Click or tap here to enter text. | | | | **Phone:** | | | Click or tap here to enter text. | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DESCRIPTION OF WORKS** | | | | | | | | |
| **Project name:** | | Enter text. | | | | | | |
| **Original Work Permit number:** | | | | Number | **Date Original Work Permit Issued:** | | | Click or tap here to enter text. |
| **Extension Start Date:** | | | Enter text | | | **Extension End Date:** | Enter text. | |
| **Extension Start Time:** | | | Enter text. | | | **Extension End Time:** | Enter text. | |
| **Please select as applicable:** | | | | | | | | |
|  | The scope and location of works have not changed. This application is for a date change/extension only. The information submitted in the application for permit listed above is still correct and applicable. *(proceed to occupancy requirements)* | | | | | | | |
|  | This application is for a small extension to the scope or location of works. I declare I have contacted my SOPA Contractor Manager regarding this extension before submitting this application.  Please describe the changes in detail: | | | | | | | |
|  | Click or tap here to enter text. | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| **SOPA internal use ONLY:** Please list any additional comments/conditions applicable for this extension | | | | | | | | |
|  |  | | | | | | | |
|  |  | | | | | | | |
|  |  | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **OCCUPANCY/ HOARDING REQUIREMENTS** | | | | | |  | | | |  | |  | | | |
| **Is the proposed work on or within 3m of a road?** | | | | | | | |  | **Yes** | | | |  | **No** |
| **Does the proposed work require occupancy of any land?** | | | | | | | |  | **Yes** | | | |  | **No** |
| *If yes, please list in detail the* ***additional*** *amount of land to be occupied:* | | | | | | | | | | | | | | |
| **On Road:** *(list additional occupancy only)* | | | | **Other Land occupied:** *(list additional occupancy only)* | | | | | | | | | | | |
|  | *Linear meters:* | *Number of lanes:* | *Number of days:* | |  | |  | | | | *Meters squared:* | | | *Number of days:* | |
| *Area 1:* | Enter text. | Enter text. | Enter text. | |  | | *Area 1:* | | | | Enter text. | | | Enter text. | |
| *Area 2:* | Enter text. | Enter text. | Enter text. | |  | | *Area 2:* | | | | Enter text. | | | Enter text. | |
| *Area 3:* | Enter text. | Enter text. | Enter text. | |  | | *Area 3:* | | | | Enter text. | | | Enter text. | |
| *Area 4:* | Enter text. | Enter text. | Enter text. | |  | | *Area 4:* | | | | Enter text. | | | Enter text. | |
|  |  |  |  | |  | |  | | | |  | | |  | |

**\**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SIGNED BY APPLICANT** | | | | | |
| In signing this application, the **applicant** agrees:   1. The details included in this application are accurate and true 2. Bonds and fees may be applicable. Please see SOPA Fees and Charges for more information. 3. To adhere to conditions listed on the Work Permit and any reasonable direction given by a SOPA Authorised Person. Failure to do so will result in the cancellation of any permits issued. 4. Accept that there are no pre-existing fault conditions at the Site or its surrounds unless noted in a Dilapidation Survey attached to this application. 5. To hold and maintain valid Public Liability Insurance for no less than twenty million dollars ($20,000,000) or such other amount as may be specified by SOPA and extended to include the interests of SOPA, for the duration of works. 6. To comply with any relevant legislation, included but not limited to Work Health and Safety Act 2011, Work Health and Safety Regulation 2011, Protection of the Environment Operations Act 1977. | | | | | |
| **Signed:** |  | **Position:** | Click or tap here to enter text. | **Date:** | Date |
|  |  |  |  |  |  |
| **SOPA internal use ONLY – SIGNED BY SOPA CONTRACTOR MANAGER** | | | | | |
| In signing this application, the **Contractor Manager** agrees:   1. They have received and reviewed any relevant documentation 2. The details included in this application are accurate to the best of their knowledge 3. To monitor compliance under any conditions listed in the work permit and any relevant legislation, included by not limited to Work Health and Safety Act 2011, Work Health and Safety Regulation 2011, Protection of the Environment Operations Act 1977. | | | | | |
| **Signed:** |  | **Position:** |  | **Date:** |  |