**ASSOCIATED BRITISH PORTS, Southampton**

**Hot Work Request** Request No:

|  |  |  |  |
| --- | --- | --- | --- |
| Berth No / Anchorage |  | Vessel  |  |
| Agent / Owner  |  | Master  |  |
| Address |  |  |  |
| Tel No |  | Facsimile  |  | to which form is to be returned  |
| Name of Contractor who will carry out Hot Work |  |
| Description of Work to be carried out  |  |
|  | Date  |  |

**General Conditions and Precautions to be Observed**

(Tick or delete as appropriate)

1. Area clear of dangerous material and Gas free (Certificate issued) [ ]
2. Adequate ventilation [ ]
3. All Hot Work equipment in good order [ ]
4. Suitable fire fighting appliances readily available at the working area [ ]
5. Supervision being exercised by competent and responsible person [ ]
6. When will Hot Works commence? Date: Time:
7. When will Hot Works Cease? Date Time:
8. Special conditions and precautions being taken

**Certificate of Checks**

I am satisfied that all precautions have been taken and that safety arrangements will be maintained for the duration of work.

Name of authorised person in charge

Signed by Master/Manager in charge (on land)

Forward to: Harbour Master, Associated British Ports, VTS Centre, Ocean Gate, Atlantic Way,  Southampton, SO14 3QN or southamptonvts@abports.co.uk

**Telephone**: 023 8048 8800  (AHM VTS 24 hours)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Permission Granted  |  |  | Permission Refused  |  |
|  | (ABP Authorised Person) |  |  (ABP Authorised Person) |
| Date |  | Time  |  |  | Date  |  |  | Time |  |
|  |  |  |  |  |  |  |  |  |  |
| Reason for refusal |  |
|  |  |
|  |

For Internal Use:: Date/Time request received

**Note**: In the event that permission is not granted Owner/Agent/Master must be advised ASAP and this request endorsed ‘Permission Refused’ giving reasons for refusal.