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**NOTIFICATION TO UNDERTAKE HOT WORK ON**

**BOARD A VESSEL**

*The Port Notices regulate all activities in areas under the control of Port of Townsville Limited. Please refer to the section within the Port Notices relating to this notification on the Port of Townsville website www.townsville-port.com.au*

*Prior to undertaking hot work on board a vessel berthed within the Port, the master and / or the vessel’s agent must notify Marine Services 24 hours prior of such intention by submitting this notification. The master must also inform Marine Services and Townsville VTS via VHF radio channel 12 of works commencing and at completion of works.*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The Master of MV \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at berth \_\_\_\_\_\_\_\_\_\_\_\_\_ request permission to  undertake Hot Work from \_\_\_\_\_\_\_\_\_\_ hrs on / / to \_\_\_\_\_\_\_\_\_\_ hrs on / / | | | | | | | | | | | |
| Brief description of hot work carried out on vessel: | | | | | | | | | | | |
| Are there any dangerous goods onboard the vessel? | | | | | | | | Yes 🞎 | | | No 🞎 |
| If **YES**, what distance away are the Dangerous Goods in relation to the Hot Work | | | | | | | | | | | \_\_\_\_\_\_metres |
| Source of Ignition:  Mark 🞎 as required | | | 🞎 Acetylene Torch | | | | 🞎 Electric Tools | | | 🞎 Brazing | |
| 🞎 Abrasive Saw | | | | 🞎 Heli-arc Welding | | | 🞎 Drilling | |
| 🞎 Electric Arc | | | | 🞎 TIG/MIG Welding | | | 🞎 Grinding | |
| 🞎 Burn off | | | | 🞎 Tools / Equipment | | | 🞎 Other: | |
| Will a contractor and /or the ship’s crew be undertaking the works? | | | | | | | | Contractor 🞎 | | | Ships crew 🞎 |
| Name of contractor / company completing the work | | | | | | | | | | | |
| Has the contractor completed a Port safety induction? Yes 🞎 No 🞎 | | | | | | | | | Induction No | | |
| Masters Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Masters Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| Date: \_\_\_/\_\_\_/\_\_\_ | | Phone: | | | Vessels Stamp: | | | | | | |
| **Email completed notification form to** [**dofficer@townsvilleport.com.au**](mailto:dofficer@townsvilleport.com.au) | | | | | | | | | | | |
| **PORT OF TOWNSVILLE LIMITED OFFICE USE ONLY** | | | | | | | | | | | |
| PSO Name: | | | | PSO Signature: | | | | | Date: \_\_\_/\_\_\_/\_\_\_ | | |
| Notated 🞎 | Denied 🞎 (see comments below) | | | | | Special precautions Yes 🞎 No 🞎 | | | | | |
| **SEND APPROVED COPY TO VTS TOWNSVILLE.** | | | | | | | | | | | |
| Comments / Special precautions: | | | | | | | | | | | |
| Has the hot work on board the vessel been completed without incident? Yes 🞎 No 🞎 | | | | | | | | | | | |
| PSO Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | Date: \_\_\_/\_\_\_/\_\_\_ | | | Time: \_\_\_\_\_\_\_\_\_\_\_hrs | | |