

Ground/Vegetation Disturbance Request Form

Date Approved:		Requesting person:	
Approved by:	Project Director/Superintendent	Date requested:	
		Date Cleared:	
This form must be completed by the person responsible for the site work and forwarded to the HSE Manager at least three (3) days prior to commencement of work. Work must not commence until approval is granted.			
Description of work/change (This section completed by Requesting Person)			
Area Name:		Other	
See attached:	Drawing <input type="checkbox"/>	Location Plan <input type="checkbox"/>	
Location Details:			
Work to occur in:	Undisturbed area <input type="checkbox"/>	Previously disturbed area <input type="checkbox"/>	Rehabilitated area <input type="checkbox"/>
Describe what the site work/change will involve:			
Proposed commencement date:		Estimate of area to be disturbed (ha):	
Other permits or requirements needed (This section completed by HSE Manager)			
Is proposed work within scope of the Environmental Management Plan?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Yes	No	Action Required
Land Clearing			Is work within scope of approved Land Clearing Permit?
Notify DEPAWS?			HSE team to determine level of notification
Excavation Permit			Submit Excavation Permit
High Voltage Permit			Submit High Voltage Permit
Community Relations			Notify Government & Community Relations Manager
Security clearance			Notify Security Manager
Cultural Heritage			Review Cultural Heritage MP to confirm
Aboriginal Areas Protection Authority			Review AAPA Certificate Conditions to confirm

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Other (specify)				
Potential environmental impact & management (This section completed by HSE Manager)				
Potential impacts:	Landscape <input type="checkbox"/>	Fauna <input type="checkbox"/>	Groundwater <input type="checkbox"/>	Air <input type="checkbox"/>
	Vegetation <input type="checkbox"/>	Surface water <input type="checkbox"/>	Potable water <input type="checkbox"/>	Community <input type="checkbox"/>
		Other (specify):		
Conditions under which the work is to be carried out:				
Approval to proceed with work				
	Signature:		Approved/Not Approved:	Date:
Managing Contractor				
HSE Manager				
Superintendent (onsite and < 0.5 ha)				
Project Director (any offsite or > 0.5 ha)				
HSE use only: Copy of approved form to originator. <input type="checkbox"/> Original copy filed TRM <input type="checkbox"/>				
Environmental clearance at completion of work/change (HSE Manager)				
Area inspected by:			Date:	
Comments:				