

## Assignment as Permit Manager

Full name of the person appointed as the Permit Manager	Contractor
Contact data: Email:  Phone:	Does the appointee hold a valid fire hazard work certificate? (Yes/No)
Addresses, contracts, projects covered by this permit	How long is this permit valid?
Is the permit manager authorised to appoint another person as a permit manager?  a) If employed in the same company:    Yes    No b) If employed by another worker        Yes    No	

..... Town/ City	..... Date
..... Appointer (signature):	..... Position
..... Full Name (written legibly)	..... Company Name

I hereby confirm to have been appointed the permit manager as detailed above.

..... Town/ City	..... Date
..... Full Name (written legibly)	..... Company Name