

Diving Request Form

| Request to carry out diving or swimming operations within the limits of Lym Location of diving operation: | |
|---|----------------------|
| Date: | |
| Time of diving operations. From: | |
| Diving contractor: | |
| Address: | |
| Tel No: Fax No or email (to which this form is to be returned): | |
| Diving Supervisors Name: | |
| Diving site telephone No: | |
| Description of work to be carried out: | |
| Client: | |
| GENERAL CONDITIONS AND PRECAUTIONS TO BE OBSERVED (Complete No. 6) | |
| 1. Diving operations shall be in accordance with the HSE Diving at Work regulations 1997 and the appropriate approved code of practise. | |
| 2. At all times during the operation an "A" Flag shall be displayed. | |
| 3. The Diving Supervisor shall inform the Harbour Master and, if applicable to the state of the | · · |
| water and on suspension / completion of diving operations unless other prior arrangements have been made. 4. The Diving Supervisor will comply with all instructions issued by the Harbour Master and Marina Manager. | |
| The Diving Supervisor will comply with an instructions issued by the narbour Master and Marina Marina Marina. The Diving Supervisor shall monitor VHF channel 66 at all times or channel 80 when working inside a marina. | |
| 6. Will a comprehensive diving project plan and risk assessment be prepared and a copy held on site including steps be taken to | |
| eliminate hazards to divers? Yes No | |
| 7. A copy of the Dive Request Form must be held on site either electronically or hard copy and available for inspection. | |
| 8. Third Party Employers Liability Insurance must be held for the activities undertaken, evidence must be submitted to the relevant office. | |
| I declare that all the aforementioned requirements have been satisfied, precautions have been taken and that safety arrangements will be maintained for the duration of the diving operation, and will not operate outside the stated area and time. | |
| Signed by Diving Supervisor: | Dated: |
| NOTE: NO DIVING OPERATIONS ARE TO BE CARRIED OUT PRIOR TO PERMISSION BEING GRANTED. | |
| Dive requests and associated documents must to be sent to Lymington Harbour Commissioners | |
| Email: <u>info@lymingtonharbour.co.uk</u> Tel: 01590 67202 | 14 Fax: 01590 677939 |
| Call ahead by telephone to ensure the request is processed in time. | |
| KNOWN VESSEL MOVEMENTS OR RESTRICTIONS | |
| For Internal Use Date & Time Received: | |
| Subject to the information stated in this request being and remaining | PERMISSION REFUSED |
| complete and accurate and to strict adherence to the general conditions | |
| and precautions specified above. | |
| | |
| For LHC | For LHC |
| FOI LIIC | FOI LITE |
| Date: Time: | Date: Time: |